

# **Evaluation of the Supervised Access Pilot Project**

- Final Report -

#### Presented to:

Ms. Rachele Dabraio
Ministry of the Attorney General
Policy Development Division
720 Bay Street
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Date:

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#### **EXECUTIVE SUMMARY**

#### Introduction

In dealing with the dissolution of marriages and common-law relationships, the courts maintain that in some cases it is in the best interests of the child(ren) to have contact with both parents. In situations where one parent, called the custodial parent, has custody of the child, the relationship with the non-custodial parent is often maintained through "access", a primary component of which is visitation.

/Section 35(1) of the Children's Law Reform Act (R.S.O. 1980) directs that "[w]here an order is made for custody of or access to a child, a court may give such directions as it considers appropriate for the supervision of the custody or access by a person, a children's aid society or other body". Supervised access may be ordered for a variety of reasons. These include: cases where there is concern that a non-custodial parent may pose a threat, either to his or her child, or former spouse; where there is alcohol or drug abuse, or psychiatric disturbance; where there is a history of concern about abusive behaviour; where there is risk of abduction of the child by the non-custodial parent; where the non-custodial parent possesses poor parenting skills; or where there has been a lengthy separation between the non-custodial parent and his or her child.

The general objective of this evaluation is to provide the Ministry of the Attorney General with a description and assessment of formal supervised access services being offered at 14 pilot project sites across Ontario. These services are provided by non-profit centres. Some centres charge modest users fees. The evaluation will form an empirical base upon which the Ministry of the Attorney General will make decisions about the future of Supervised Access in Ontario.

In November 1991 the Attorney General and the Minister for Women's Issues announced

that funding for these projects from the Ministry of the Attorney General would be made available for two years. (The Pilot Project has been extended until November 30, 1994). In September 1992 formal evaluation of the Supervised Access Project began. The Supervised Access centres provided two primary services. One service, called supervised access visits, permits non-custodial parents to visit their children at a Supervised Access centre. The visit is supervised by trained staff and volunteers who are required to observe the visit at all times on site, and to maintain a neutral stance. Notes describing factual aspects of the visit are written up after each visit. The other service termed an exchange, permits custodial parents to drop off their child(ren) at the centre, where they are picked up by non-custodial parents. Visits occur off-site, and are not supervised. At the end of the visiting period child(ren) are returned to the centre where they are picked up by the custodial parent.

The evaluation addressed a large number of issues. These issues fall into the following five broad categories: description of community needs; service description; user satisfaction; service efficiency; and service impact.

#### Methods

The study used the following methods to collect information: monthly statistical reports; a survey of custodial and non-custodial parents; interviews with Supervised Access Centre staff, community agencies, parent organizations, advisory board members, and community groups; interviews with children; and interviews with judges and lawyers.

#### **Findings**

#### Overview

• The 14 Supervised Access centres are scattered throughout Ontario in a variety of communities; 12 of the 14 programs were part of a larger, well-established, non-profit organization; most programs did not exist prior to receiving funding from the Ministry of the Attorney General for the Supervised Access Pilot Project.

- A central goal of the Supervised Access Pilot Project is to provide an opportunity for visits and exchanges to occur between children and non-custodial parents in a safe and neutral environment. Supervised Access Centres are generally fairly small, and have an average annual budget of about \$74,000. A typical Supervised Access project has a coordinator, one or two other paid staff, and several volunteers. Generally the coordinator is responsible for overall coordination of Supervised Access. She/he also spends much of her/his time interacting with parents negotiating visits and arrangements. Paid staff are responsible for supervising visits, meeting with parents as well as monitoring the visit itself. Volunteers frequently spend much of their time monitoring visits, ensuring their safe, smooth functioning. While volunteers may identify issues requiring some action or intervention, paid staff are responsible for making decisions about visits (e.g., terminating a visit).
- Someone observing a typical visit would probably see two or three non-custodial parents each playing with their son or daughter, a child usually under eight years of age. Visits usually occur every two weeks, take place on a Saturday or Sunday, and last two or three hours. The frequency and duration of the visits are usually determined by the court. About 15 minutes before a visit, the custodial parent and child arrive at a Supervised Access centre and meet briefly with a staff member. The custodial parent then leaves the premises. The child is taken by staff into a large, bright well-equipped room that frequently serves another function (e.g., a day care centre) during week days. There, the child plays a game or chats with a staff member for 5-10 minutes until the non-custodial parent arrives. The non-custodial parent and child then play or talk while a staff person monitors the interaction. From time to time the parent or child will talk to staff, but few of the staff interactions with the family are designed to change the behaviour of the child or adult. When the visit is over the non-custodial parent says goodbye and leaves the premises. Shortly afterward, the custodial parent arrives, chats briefly with staff, and then leaves with her/his child.

#### Monthly Statistical Reports

- Between July 1992 and December 1993, across all 14 centres a total of 26 critical incidents were reported; most of these involved indications of child abuse and parental confrontation; some of the child abuse reports occurred on site. Relative to the number of visits, critical incidents occur very infrequently. In 1993, the period for which there is a good record of visits, there were 21 critical incidents during a total of 14,812 visits.
- The average number of visits per centre ranged from fewer than 20 to over 300 per month and exchanges from 0 to over 100. In terms of the average number of visits, the two largest centres by far were Toronto and Peel. The growth in the number of visits occurred mostly in 1992; the number of visits increased only slightly by 7% in 1993. In contrast, the number of exchanges has continued to grow in 1993, and was about 50% larger at the end of the year than at the beginning.
- There is considerable movement of families in and out of Supervised Access. Averaged across all agencies, about 30.23 families were in the program at any point in time and each month 2.96 families left the program, and 4.43 families joined the program. Overall, participants spent an average of 7.76 months at a Supervised Access centre, confirming reports that Supervised Access is a short-term program for most clients. About 60% move on to unsupervised arrangements.
- Programs operating prior to the establishment of the Supervised Access Project--Kitchener/Waterloo, London, and Peel--tend to have clients in their programs for longer periods of time than newer programs. Further analyses suggest that as programs are in operation for longer periods of time, the composition of their clients change, and increasingly consist of long-duration clients. This reduces the ability of these agencies to serve short-duration clients.

- Most non-custodial parents were fathers, and most custodial parents were mothers; parents using Supervised Access had on average about 12 years of education. Only about 43% of the parents had jobs at the time of the survey. Non-custodial parents were significantly more likely to have a job than custodial parents; non-custodial parents were also more likely to have remarried or to be living in a common-law relationship than custodial parents.
- Many parents (61%) reported that they had used other types of access arrangements prior to their contact with the Supervised Access centre. The most common reasons given for using Supervised Access included: concerns about abuse of the child, fear of abduction, unresolved conflict between the ex-spouses; wife assault, and concerns about the parenting ability of the non-custodial parent.
- Custodial and non-custodial parents disagreed about the types of access arrangements they most preferred. Custodial parents equally preferred arrangements that minimized their contact with the non-custodial parent (no access) or imposed the most structure upon visits between the child and non-custodial parent (supervised access). In contrast, non-custodial parents overwhelmingly preferred arrangements that were the least restrictive (unsupervised access).
- Over 90% of custodial parents and 70% of non-custodial parents were satisfied or very satisfied with Supervised Access. In contrast, only 30% of custodial parents and 11% of non-custodial parents were satisfied with the legal system, (and 33% of custodial parents and 63% of non-custodial parents were very dissatisfied with the legal system). Satisfaction with their lawyer fell between these two extremes, although the pattern of responses resembled more closely the ratings of Supervised Access than the legal system.
- Custodial parents reported significantly higher levels of satisfaction with the Supervised Access program than non-custodial parents.

- Both custodial and non-custodial parents were satisfied with almost all aspects of Supervised Access. Over 80% of parents were satisfied with the facilities, staff neutrality, safety for child, safety for parent, and staff. One area that seemed to give parents difficulty was the reports on visits, and this did not vary by type of parent. Only 48% of parents were satisfied, 25% were neutral, and 26% were dissatisfied with this feature of Supervised Access. One aspect of Supervised Access centres that displeased non-custodial parents but that custodial parents liked, was the restriction of visits to the site. This result is not surprising, given that most non-custodial parents want to visit their children in as "normal" a setting as possible, whereas custodial parents want to restrict the location of visits to ensure the safety of their children.
- Parents may have a partial but incomplete understanding of Supervised Access prior to the start of visits. Some parents reported that they expected that there would be counselling and mediation, two services not provided by Supervised Access. In addition, 43% of the non-custodial parents, and 27% of the custodial parents reported that their expectations of Supervised Access had changed since they began to participate in the program.
- A series of regression analyses investigated which factors affected custodial and non-custodial parents overall satisfaction with Supervised Access. Results showed that overall, custodial parents were more satisfied with Supervised Access than non-custodial parents. Further analyses found that custodial parents with higher levels of education, and those who felt that the program had met their expectations, had higher levels of overall satisfaction. These two factors taken together are strongly predictive of overall satisfaction, accounting for 28% of the variance. In contrast, none of the personal characteristics of non-custodial parents were significantly related to their satisfaction.
- Investigation of the new access arrangements made by parents who had left

Supervised Access found that 59% had moved to an access arrangement that was either unsupervised (45%) or informally supervised (14%). The remaining 41% had no access arrangement. This finding is consistent with the divorce literature that has found that 50% of divorced fathers have stopped seeing their children one year after divorce.

#### Centre and Community Perspective

- To obtain the perspective of the centres and community the following people were interviewed: program coordinators, staff, volunteers, one person from each advisory board or Board of Directors, and at least one representative from agencies that had been in contact with the centre. The results of these interviews are presented in terms of an organizational framework consisting of the following categories: Goals and Objectives, Environment, Resources, Organizational Structure, Decision-Making, and Communications.
- Projects reported that the main goal of their project was to provide an opportunity for visits between non-custodial parents and children to take place in a safe and neutral environment. This is also the central objective of the Ministry of the Attorney General.
- Most centres had few formalized policies and procedures in addition to those set out
  by the Ministry of the Attorney General. The most important policies according to
  coordinators were those associated with safety and neutrality with intake procedures
  coming a close third.
- All coordinators reported that their centre had fairly detailed criteria that clients had to satisfy before being admitted into the program. These criteria do not seem to exclude clients because, a total of only about 30 families had been refused service during intake at all 14 program locations in a one year period.

- Despite high ratings of neutrality by custodial and non-custodial parents, and confirmed by staff, board and umbrella organization representatives, 30% of staff members interviewed reported that they found it hard to behave neutrally, with a difficult situation arising about once a month. Several types of difficult situations were described. These included: deciding when to facilitate parent/child interaction; deciding when to talk to a parent about her/his bad language; deciding how to respond when a parent recounts a story and requests support; or deciding how to respond to a child's comments about one of her/his parents. This result suggests that more attention needs to be paid to the issue of neutrality in the pre-service and inservice training of staff.
- One of the most salient variables in terms of organizational context is whether the Supervised Access centre exists as a stand-alone agency or is part of a larger organization. Only two centres fall into the former category: Toronto and Cornwall. The impact of this variable on start-up seems mixed. Cornwall's independent status led to long delays in commencing operation because it took a long time to incorporate the centre. The Toronto centre did not experience this delay because it had been incorporated a number of years ago when it operated in Etobicoke.
- When we inspected the sites we found that they were generally well set up and equipped for children under 9 or 10 years of age, but were less suitable for older children.
- Coordinators spend much of their time talking to parents, lawyers, and their staff/volunteers. With prospective parents, coordinators talk about the program and arrange the intake. With parents already in the program, coordinators spend time resolving problems, responding to requests, and rescheduling visits.
- Supervised Access programs provide services to clients from a wide range of ethnic backgrounds. About a third of the coordinators reported that it was difficult to serve

these groups. Difficulties included language and cultural differences.

#### Interviews with Children

- A total of 29 children from 17 families were interviewed
- The most common reason children gave about what they liked about coming to the centre was to play with the toys (76%). In terms of what they did not like about the centre, most children said nothing (68%) or said things about their families that were not related to centre functioning.
- The majority of children (58%) could not give any account of why they came to the centre; a further 17% had only a minimal understanding. Twenty-four percent of children showed a detailed and accurate understanding of why they came to the centre. Forty-six percent of the older children, 7 years of age or older demonstrated an accurate understanding of why they came to the centre, while none of the younger children did (4-6 years old). The same pattern was evident in relation to the centres rules. Overall, 24% of children disliked the rules that they had to follow at the centre.
- The overall impression from the interviews is that most children are happy with the arrangement of going to the centre and they do not experience any significant difficulty in relation to their visits. For some, however, it is not such a positive experience. These children's relationship with their non-custodial parent seemed, from their perspective, to be a troubled one. For example, one child said, "My father has ruined my mother's life" and another child was told by his mother not to tell his father he loved him.
- Although distressing events were relatively uncommon, few children have an understanding that the need for supervised access is related to their non-custodial parents' need to be supervised in their interaction with their children.

#### Child Behaviour Checklist Results

- Standardized, commonly used, screening instruments were used to determine the presence of emotional and behaviourial problems in children.
- The results show that children age 4-12 in Supervised Access were 8 times more likely to exhibit internalizing behaviour disorders such as loneliness, withdrawal, fearfulness, depression, guilt, and somatic complaints, in a clinical range than a comparable age group in the general population. In the 4-12 age range, children were 14 times more likely to show externalizing behaviour disorders than children in the general population. None of the 2-3 year old children showed internalizing or externalizing behaviour in the clinical range. These results are not surprising because rates of childhood disturbance increase as levels of stress in children's lives increase.
- Supervised Access could function as a source of early referral for children experiencing difficulties coping with their current familial situation. Hence, it is important for coordinators to know that they are dealing with a population of children who are at high risk of emotional and behaviourial problems. This also means that coordinators must be advised on the appropriate steps to help families obtain treatment if they want this.

#### Service Quality

- One of the more striking findings of this study was the high level of overall satisfaction of custodial and non-custodial parents especially in comparison to their satisfaction with the legal system. Interviews with children revealed that they tended to be happy visiting Supervised Access centres. There was some evidence of a gap between services parents expected and those available. In addition, child interviews suggest that some children do not have a clear idea of why they were at the centre.
  - These results suggest that centres may need to spend more time during the intake process and during initial visits with parents and children explaining to them the

Supervised Access program.

#### Impacts on Legal System

- The impacts of the Supervised Access program were investigated by interviewing a group of lawyers and judges. The 14 lawyers and 13 judges interviewed were experienced in family law, familiar with the Supervised Access program, and showed similar views about Supervised Access and its impact on the legal system.
- Both lawyers and judges were very satisfied with the Supervised Access program, and believe that the absence of a Supervised Access program would increase the use of informal supervised access arrangements. They reported that these arrangements were often unsatisfactory. In addition, the absence of the Supervised Access program would increase the number of parents unable to have any access to his or her child.
  - Lawyers and judges also believe that Supervised Access may save the legal system time and money. This conclusion should be interpreted cautiously.
- It was possible to estimate the rate of use of Supervised Access per 1,000 families.

  The calculations show that Supervised Access is a specialized program used only by small numbers of families. We estimate that if the program were available throughout Ontario, about 1,700 families would use the service at any given time.
- The final chapter presents conclusions.

#### 1 INTRODUCTION

In dealing with the dissolution of marriages and common-law relationships, the courts maintain in some cases that it is in the best interests of the child(ren)<sup>1</sup> to have contact with both parents. In situations where one parent, called the custodial parent, has custody of the child, the relationship with the non-custodial parent<sup>2</sup> is often maintained through "access", a primary component of which is visitation.

Section 35(1) of the Children's Law Reform Act (R.S.O. 1980) directs that "[w]here an order is made for custody of or access to a child, a court may give such directions as it considers appropriate for the supervision of the custody or access by a person, a children's aid society or other body". Supervised access may be ordered for a variety of reasons. These include cases where there is concern that a non-custodial parent may pose a threat, either to his or her child or former spouse; where there is alcohol or drug abuse, or psychiatric disturbance; where there is risk of abduction of the child by the non-custodial parent; where there is a history of concern about abusive behaviour; where the non-custodial parent possesses poor parenting skills; or where there has been a lengthy separation between the non-custodial parent and his or her child.

Although Supervised Access programs differ in terms of the services offered, one standard service, called supervision of access visits, or simply visits, permits non-custodial parents to visit their children while supervised. Another service often provided, termed an exchange, enables custodial parents to drop off their children and have non-custodial parents pick them up, without the parents actually having to meet.

Several methods exist for providing supervision of visitation by non-custodial parents. In one option, a relative or "other trusted person" supervises visits. This method,

<sup>&</sup>lt;sup>1</sup> Although more than one child may be involved in supervised access, for the sake of brevity, the singular form will often be used in this report.

<sup>&</sup>lt;sup>2</sup> The non-custodial parent usually is the father, but occasionally is the mother, a grandparent, another relative, or has some other relationship to the child.

which will be called informal supervised access in this paper, has been reported to have several shortcomings, although these problems have not yet been systematically documented. Parties may have difficulty agreeing on a supervisor because of concerns about their neutrality, and it may also be difficult to obtain prior consent of a supervisor as required in Section 35(2) of the Act. Ensuring the qualifications of a supervisor as well as the safety of the child and other parties involved is also potentially problematic. Indeed, The Ontario Advisory Council on Women's Issues argues that "if supervised access is not properly managed -- a neutral setting with qualified supervisors -- then the threat of violence and control to both the child and custodial parent persists and the best interest of the child is not served" (1991, p. 8).

A second method, called formal "supervised access services", provides facilities and personnel for supervision of visits and facilitation of exchanges. One type of formal service is private-sector funded with a profit orientation. The main drawback of this type of service is the financial barrier it presents for lower income families; regulation of service provision is another significant issue. Another type is a non-profit service which provides supervised access and exchanges for free or at a modest cost to families. Difficulties in obtaining and maintaining funding have kept their numbers small. Finally, there are also private practitioners who provide one-to-one supervision, usually for a substantial fee.

The general objective of this evaluation is to provide the Ministry of the Attorney General with a description and assessment of formal supervised access services, funded by the Ministry, being offered at 14 pilot project sites across Ontario. These services are provided by non-profit centres usually for free, although some centres charge modest user fees. The evaluation will form an empirical base upon which the Ministry of the Attorney General will make decisions about the future of Supervised Access in Ontario.

#### 1.1 Literature Review

A review of the small body of literature on supervised access indicates that almost no empirical studies have been carried out, and that little is known about the families using supervised access programs, the impacts of supervised access on parents and children, and on the type of long-term access arrangements used by these families (Straus and Alda, 1994). The current study is one of the first systematic attempts to describe the functioning of supervised access empirically.

The lack of research on supervised access is surprising in one sense because the number of supervised access programs appear to be increasing in Canada (e.g., Lubell and Dibbs, 1987) and the United States (e.g., Stott, Gaier, and Thomas, 1984). At this point several factors seem to contribute to the need for supervised access. One factor is the high divorce rates in North America. In the United States, about 40% of all children will experience divorce at some point as they grow up. Reports of wife assault and of child sexual abuse also have recently increased. It has also been suggested that the increased enforcement of child support has resulted in previously uninvolved fathers wanting to visit their children (Straus & Alda, 1994).

Straus and Alda (1994) indicate that in addition to providing visits and exchanges, some programs also provide therapy, counselling, or parenting skills where appropriate (Straus & Alda, 1992). A difficulty with the Supervised Access centre providing these services, however, is a potential role conflict for centre staff who must act both as counsellors and neutral supervisors (Sookraj and Rawson, 1988).

Centres also appear to differ in their relationship to the court system. In the U. K. for example, Supervised Access centres are situated in Community Mediation centres, and are intended to be used by parents to avoid court intervention. In contrast, other centres such as one in New York (Stott, Gaier, and Thomas, 1984) were 90% populated by couples in litigation. In addition, some centres require staff to record factual information about visits for use by the courts, while others do not (Straus and Alda, 1994).

Finally, some services provide supervised access on a fee for service basis. The fees vary, but American centres can cost \$30 to \$50 per visit (Straus and Alda, 1994).

The success of a Supervised Access program may be influenced by the calibre and training of staff. Straus and Alda (1994) suggest that no single type of training currently provided is adequate to prepare staff to work in a supervised access program. They propose a basic training program for any "child access monitor": an elementary legal education pertaining to divorce, court orders for custody and access, and penalties for non-compliance; instruction on the psychological aspects of truculent divorced couples in conflict and the implications for service providers; and practical experience in observing and recording parent-child interactions, and in intervening when necessary to protect a child. In addition, monitors who work alone must be able to conduct the intake process and exclude unsuitable cases; keep adequate records for the court; testify in court; and make appropriate referrals. Finally those who will counsel clients should have proper clinical training.

#### 1.2 The Supervised Access Pilot Project

In November 1991 the Attorney General and the Minister for Women's Issues announced that funding for a Supervised Access Pilot Project would be made available for two years from the Ministry of the Attorney General. (The Pilot Project has now been extended for an additional eight months until November 30, 1994.) In September 1992 formal evaluation of the Supervised Access Pilot Project began. The Supervised Access centres involved in the pilot project provide two primary services, visits and exchanges. Non-custodial parents visit their children at a Supervised Access centre. The visit is supervised by centre staff/volunteers who are required to observe the visit at all times, and to maintain a neutral stance. Notes describing factual aspects of the visit are written up after each visit. During an exchange custodial parents drop off their child(ren) and non-custodial parents to pick them up through the centre without actually having to meet each other. Visiting occurs off-site, and is not supervised. At the end of the visiting period child(ren) are returned to the centre where they are picked up by the custodial parent.

The Ministry received 55 proposals from across the province; 14 centres in different parts of Ontario, were selected for funding. The centres selected are located in the following communities: Belleville, Brantford, Durham, Kitchener/Waterloo, London, Midland, North Bay, Peel, District of Rainy River, Sault Ste. Marie, Windsor, York Region, Toronto, and Cornwall. Proposals were evaluated according to their ability to provide a safe, neutral, non-stigmatizing environment for children and families and a contained, safe, physical space for children; their ability to provide trained staff and volunteers who are sensitive to the needs of children and families; their ability to meet the needs of their local communities (e.g., in terms of ethnic and language issues) and to be accessible to the community in terms of location and times of operation; their ability to access, maintain, and build on existing programs and resources; and their nonprofit, community-based status.

Ministry Criteria. The successful centres funded by the Ministry of the Attorney General were charged with providing a safe, neutral service. In addition these centres had to conform to a number of other criteria set out by the Ministry as outlined below:

- The centre must be an incorporated, non-profit charitable organization;
- The centre must provide a <u>safe</u>, neutral, unstigmatized setting in which visits can occur;
- The needs of the community (e.g., urban/rural, ethnic, language, other minority needs), must be met;
- Centres must access, maintain and build on existing community programs, facilities, and funding;
- The service must be accessible to the public both in terms of location and hours of operation;
- The program must provide trained staff and volunteers who are sensitive to the needs of children;
- The service must be delivered in a contained and safe physical space;
- Services must remain limited to providing supervision of access visits as
  opposed to providing mediation, therapy, counselling, parenting skills,
  etc. If the centre provides services other than supervised access, it must
  be demonstrated that they are provided separately from supervised

access services;

- Factual written reports regarding the visits must be provided;
- Centres must remain limited to providing services to separated families in which a parent or other person is legally responsible for the child and where there is no formal involvement by the Children's Aid Society. In the event that services are being provided to CAS cases, these services cannot be paid for with funds from the Ministry of the Attorney General.
- Visits must be conducted on-site in a group setting. If off-site visits are currently being provided, they will only be allowed for those families who are currently engaging in such visits and for no new families.
- There must be no limit to the length of time that clients can use the service.
- The guidelines for user fees are as follows:
  - a maximum of \$25.00 per family per visit or exchange
  - a maximum of \$50.00 for reports
  - no fees for families who cannot afford to pay
- The centre must have adequate liability insurance coverage.

#### 1.3 Evaluation Issues

This evaluation addressed a large number of issues. These issues fall into five broad categories: description of community needs; service description; user satisfaction; service efficiency; and service impact. A detailed list of the issues that were investigated is presented in Table 1.3.

For most issues shown in Table 1.3, the study obtained data from more than one source. This research strategy, sometimes referred to as triangulation, (Denzin, 1970) ensured that relevant issues were identified and thoroughly explored and understood from a variety of perspectives. We have reported when there was convergence across different data sources. In cases of discrepancy, we have noted that result and tried to determine the basis for differences (Trend, 1979).

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Table

Community Needs Description	<ul> <li>Describe the community, level of community support when service was established, and currently available services and gaps in services.</li> <li>Profile the client target groups and their needs.</li> </ul>
Service Description	<ul> <li>Review policies and procedures developed to ensure client safety. Describe any critical incidents placing clients at risk.</li> </ul>
	<ul> <li>Analyze the organization, its administration, policies and procedures, uses of user fees, the type and volume of services provided, and linkages to community services and the courts.</li> <li>Assess staff qualifications, training and experience; describe their duties and activities; determine their level of satisfaction and turnover.</li> </ul>
u.	<ul> <li>Profile clients and their needs, and degree of movement from supervised to unsupervised access.</li> <li>Determine how many clients have been refused service. Examine why and what types.</li> </ul>
User Satisfaction (clients & agencies)	<ul> <li>Examine clients' needs and expectations and the extent to which these were met; assess client satisfaction with the centre, with services received and specific aspects thereof.</li> <li>Examine how clients perceive accessibility, reliability and affordability of the service.</li> <li>Examine how clients perceive competence and neutrality of staff.</li> <li>Analyze the impact of the service on parent-child and parent-parent relationships, and on access arrangements.</li> <li>Contact ex-clients and ascertain why they withdrew.</li> <li>Describe and assess the interaction between the service and related service providers including the referral process, access issues, and frequency of service use.</li> <li>Assess satisfaction of community agencies with the centre, with services received and specific aspects thereof.</li> <li>Obtain client and community suggestions for improvement.</li> </ul>
Service Efficiency	<ul> <li>Determine efficiency in terms of costs and staff allocation.</li> </ul>

# Service Impact

- Examine the extent to which services: were implemented as intended; achieved their objectives; reached their target groups.
  - Determine impact of the service on: children, parents and others with access; community agencies; and the legal system.
- Examine service quality issues as perceived by users and staff. Determine what gaps remain in service delivery, what improvements could be made, and what alternative methods of service delivery could be introduced.
- Assess the utility of different models and levels of service.
- Determine the extent to which services are integrated into, and have the support of the community and community agencies.

#### 1.4 Approach to Evaluation

In carrying out this evaluation we have sought to understand the operation of Supervised Access from a variety of perspectives. Central to the evaluation has been a concern with understanding how Supervised Access functions from the point of view of its clients: custodial parents, non-custodial parents, and children. Each of these perspectives provides important insight into the functioning of Supervised Access.

The study also sought to obtain the perspective of those people who were involved with Supervised Access centres. For this reason we visited centres and interviewed the coordinator, another staff person, a volunteer, and a member of the Board/Advisory Committee. We obtained the community perspective by interviewing members of community groups and agencies, and the legal perspective through interviews with lawyers and judges. A list of the community groups/agencies interviewed is presented in Appendix A.

Finally, we reviewed documents, visited centres to observe their operations, and analyzed forms kept to document the activity of the centres.

Approach to Organizational Analysis. This study analyzed the structure and function of Supervised Access projects using a conceptual framework developed by Meltsner and Bellavita (1983). According to this framework it is possible to describe the operation of an organization through a systematic assessment of its eight "elements": goals, environment, members, structure, resources, tasks, decisions, and communications. In carrying out the analysis suggested by Meltsner and Bellavita (1983), we have in this report focused on their operation once centres were up and running (Pressman & Wildavsky, 1973).

Service Quality. This evaluation has also investigated the quality of services provided by Supervised Access projects. In part, this analysis was carried out using the Service Quality Model adapted from Parasuraman, Zeithaml, and Berry (1985). According to this model, clients rate service quality by comparing the service that they actually received with the service they expected to receive. To the extent that the service falls

short of expectations, there is a quality gap. The service quality model then goes on to identify several different possible reasons why there can be a service gap.

Outputs and Impacts. Finally, we have investigated the impacts of the program on its clients: custodial and non-custodial parents and children. In addition, through interviews with judges and lawyers we have examined the impact of the program on the legal system.

#### 2 METHODS

This section reviews the primary methods used to collect information. Copies of all data collection instruments used in the study are presented in a document titled, "Data Collection Instruments for the Supervised Access Pilot Project".

#### 2.1 Monthly Statistical Reports

Each Supervised Access program is required to submit to the Ministry each month a statistical report profiling its activities for that month.

Upon receipt, the Ministry forwarded the reports to the research team to be entered into the computer and analyzed. The months for which statistical reports were received from each agency at the time this report was prepared are shown with an X in Table 2.1.1.

Statistical Reports Received from Supervised Access Programs for 1993 Table 2.1.1

AGENCY			MO	MONTHS (1993)*	993)*							
	Jan '	Feb	Mar	Apr	May	Jun	Jly	Aug	Sept	100	Nov	Dec
Belleville	×	X	Х	X	×	×	×	×	×			×
Brantford	×	×	X	×	×	×	×	×	×	×	×	×
Durham	×	×	×	X	×	×	×	X		X		
Kitchener/Waterloo	×	×	X	X	×	×	×	×	×	×	×	×
London	×	×	×					X		×	×	×
Midland	X	×	×	×	×	×	×	×	×	×		×
North Bay	×	×	X	· X	X	×	X	×	×	X		×
Pecl			X	×	×	×	X	×	×	×	×	×
District of Rainy River	×	×	X	×	×	×	×	×	×	×	×	×
Sault Stc. Marie	×	×	×	×	×	×	×	×	×	×	×	×
Windsor	×	×	×		×	×	X	X	×	X	X	×
York Region	×	X	×	×	×	×	×	×	×	×	×	×
Toronto	×	×	×	×	×	×	×	×	×	×		
Cottiwall	×	.×	×	×	×	×	×	×	×		×	×

analyses. A few reports were received after completing the The X's indicate those reports included in the analysis.

#### 2.2 Survey of Custodial and Non-Custodial Parents

Parents were first interviewed by phone in late July and August 1993. The parent interview consisted of two main sections. Section one was completed by all parents (N=121) only once and is called the short version of the interview. In section one, interviewers asked about parents' previous access arrangements and their satisfaction with supervised access, the legal system, and their lawyer. Parents who reported that they were no longer with the Supervised Access program also answered a few questions about why they had stopped using the program, and what access arrangement was currently in place.

A subsample of parents who completed the first part of the interview (N=51), were asked some additional questions at two points in time, about six months apart. One series of questions, asked during both interviews, investigated whether the attitudes of parents, for example their hostility toward their ex-spouse, changed over time.

Custodial parents who were part of this sub sample were also asked to rate the behaviour of one of their children. A randomly selected half<sup>3</sup> of these custodial parents rated the behaviour of their child during the July-August interview while the remainder rated the behaviour of one of their children in the December-January interview.

A total of 31 custodial parents completed behaviour ratings of their child. If more than one child between the ages of 2-16 was attending a Supervised Access centre, one child was randomly chosen to be the rated child. Children 2-3 years of age were rated using the Child Behaviour Profile. For children ages 4-16 years, the Child Behaviour Checklist (Achenbach, 1991) was used.

These behaviour rating instruments are commonly used screening instruments to

Time and budget constraints precluded administering the CBCL to the custodial parents in the impact sample both at the time of the initial interview and again at follow-up. Therefore, half of the custodial parents completed the CBCL at the initial interview and the other half will be asked to complete it at the time of the follow-up interview.

determine the presence of emotional and behavioral problems in children. These instruments are standardized, and have been shown to have high reliability and validity (see, Achenbach (1991) for further details).

The generation of the sample of parents to be interviewed was fairly involved. It began with a list of 256 parents/guardians who had signed consent forms agreeing to participate in the evaluation. Program coordinators were then contacted to determine which of these parents/guardians were still in the program and were involved in visits rather than exchanges. The results of this review reduced the list to 208 parents/guardians.

To determine whether a parent/guardian would be asked some or all sections of the questionnaire, parents were classified as follows: non-custodial/not-paired (n=49), custodial/not paired (n=39), non-custodial/paired (n=60), and custodial/paired (n=60). [For grouping purposes, parents labelled "paired" refers to those parents who are linked to the same child(ren).] All non-custodial and custodial parents who were not paired were interviewed once and asked to answer the short version of the interview, while all non-custodial and custodial parents who were paired were asked to answer the long version of the interview. This means of sample selection was chosen because we wanted to ask the impact questions (e.g., regarding levels of hostility) to matched parents, i.e., those who had been partnered with one another prior to separation/divorce.

From the list of 208 parents/guardians, only 121 interviews involving the short version of the questionnaire were successfully completed. Of this total, only 32 interviews (16 with custodial parents, and 16 with non-custodial parents) represented successfully completed interviews in which both the custodial and non-custodial parents were linked to the same child(ren). Almost all interviews were conducted by phone, except for 6 parents for whom telephone contact was not possible. These parents were mailed a questionnaire, with appropriate instructions for its completion.

Successfully completed interviews for each of the four classifications were as follows: non-custodial/not paired (n=32); custodial/not paired (n=28), non-custodial/paired (n=23), and custodial/paired (n=38).

A number of steps were taken to try and contact parents. The interviewer made at least five attempts on different days and at different times of day to contact each parent. Despite these efforts a total of 60 parents could not be reached. A further 27 parents did not participate; of these 9 refused, 15 were disqualified because they used Supervised Access solely for exchanges, and 3 parents failed to mail back their questionnaires.

The interviewers (2 female, 1 male) had at least a B.A. in Social Science, and most were completing postgraduate studies at the Institute of Child Study at the time of the interview. Prior to administering the questionnaire, all interviewers met with the field manager, and carefully went over the interview guides and protocol.

Upon contacting a parent/guardian, the interviewer began by explaining the purpose of the call. The interviewer then asked if the parent would be willing to participate in a 20-minute phone interview which would focus on her/his satisfaction with Supervised Access. For those parents who agreed to participate but could not be interviewed at the time of the call, an alternate time for the interview was scheduled.

Prior to conducting the interview, the interviewer would again confirm with the parent that he/she was still involved with the program. If a parent indicated that he/she had formally left the program, then exit information was obtained and the parent was administered only the short version of the questionnaire.

Once the short version of the questionnaire was completed, the interview was terminated unless the parent had been selected to continue with the longer version. Prior to conducting the latter sections of the interview, the interviewer asked the parent if (i) he/she would be willing to answer further questions which would take an additional 15-20 minutes and would focus on her/him self, ex-spouse and child; and, (ii) if he/she would be willing to participate in a second similar phone interview which would take place approximately in 6 months. Unless a parent refused, the interviewer proceeded, with the parent responding to all applicable sections of the questionnaire.

#### 2.2.1 Follow-up Survey of Custodial and Non-Custodial Parents

The follow-up telephone survey was administered approximately 5-6 months following the first interview, in late December 1993 and January 1994. Only custodial and non-custodial parents/guardians who had received the second section (the impact portion) of the questionnaire during the initial interview, and had granted permission to be contacted for a follow-up interview, were called. The sub-sample consisted of 51 parents/guardians, of which a total of 24 parents were paired.

The interviewer followed the same interview protocol as was established for the initial interview except for the following: the purpose of the study was described more briefly and the interviewer stated that the follow-up survey would only take 10-12 minutes to complete.

During the follow-up interview, the interviewer re-administered specific sections from the original parent interview - the exit information and the impact sections. The child behaviour ratings instrument was also administered but only to those respondents who had not completed this instrument at the time of the initial interview.

#### 2.3 Interviews with Centre Staff and Community Agencies

#### 2.3.1 Interviews with Coordinators, Other Staff, and Volunteers

Three semi-structured interview guides were developed for interviews with coordinators, other staff, and volunteers. Each guide was designed so that questions were placed on the left-hand side of the page and response categories on the right. If unsure about the reply, the interviewer probed until there was enough information to assign the response to an existing category, or to establish that the response did not fit into any of the existing categories. In this case, the interviewer briefly described the unanticipated response. Using this approach it was possible to provide comparability of responses across interviews. At the same time, it was possible to record unanticipated information.

The Coordinator interview guide addressed issues under the following major section

headings: background information; staffing; facilities; service delivery; organization; decision making; policies and procedures; providing inclusive services; goals and objectives; and impacts. The interview guide for staff and volunteers was divided into the following sections: experience of staff; service delivery; and impacts of Supervised Access.

Coordinators, other staff and volunteers were first interviewed in person at their Centre in January 1993 except for the staff at Cornwall. This centre had not yet begun to operate because, unlike the other centres, Cornwall had to incorporate a process that took several months. The coordinator at Cornwall was first interviewed by telephone in September 1993. Prior to the interview copies of the questions were sent to the interviewers. The coordinator interview typically lasted 1.5 hours, while the staff and volunteer interviews lasted about half an hour.

Follow-up interviews with the coordinator and staff took place in September 1993. The procedure used in the second interview was the same as the first, except that the interviews were conducted by phone. The second interview with volunteers was dropped because information obtained from volunteers during the first interview largely duplicated that provided by the coordinator and staff.

# 2.3.2 Interviews with Parent Organizations, Advisory Board Members and Community Group/Agency Members

Interview guides developed for these interviews consisted of open-ended and semistructured questions. The interview focused on the function and role of the Supervised Access centre within the community, as well as, when it was applicable, the relationship between the centre and its parent organization.<sup>5</sup> Questions in the parent organization and advisory board interview guides were categorized under the following section headings: community awareness and demand; relationship with Supervised Access centre; service description; communication/decision-making; satisfaction and

<sup>&</sup>lt;sup>5</sup>The term 'parent organization' refers to the organization with which the Supervised Access centre was linked and reported to. All centres except for the ones in Toronto and Cornwall were part of a larger organization.

impacts; and, respondent information. The community group/agency interview guide was similar to the above protocols except both the service description and communication/decision-making sections were deleted.

To obtain the names of people to interview, Supervised Access coordinators were asked to nominate one senior member from each of the three groups. Occasionally, the same individual was nominated to represent two groups, typically the advisory board and the community agency. To avoid having the same respondent for two different interviews, at the time of the initial contact, the group member was asked to select which group he/she was better suited to represent. In addition, this individual was also asked to provide, if possible, a name of another group member who could be interviewed for the remaining non-selected group.

Interviewers made initial contact with potential respondents by telephone. During this initial contact, the interviewer identified her/himself and described the reason for the call. The nominee was then asked if he/she would be willing to participate in a 30 minute (45 minute for the advisory board group) telephone interview. If the group member agreed to participate an interview time was arranged and a copy of the interview questions was sent. If the nominee was unable to participate (usually because this group member felt that he/she had limited knowledge regarding the Supervised Access program), the interviewer would then ask to be referred to the appropriate group member who could be contacted for an interview.

Interviewers questioned representatives from each parent organization<sup>6</sup> (N=14), a member from each advisory board (N=14), and a representative from at least one local community group or agency (N=17) familiar with the local Supervised Access centre. The interviewers had at least a B.A., were experienced interviewers, and had been briefed prior to administering the interview guides.

<sup>&</sup>lt;sup>6</sup>In the case of the two independent centres, we interviewed the Chair of the Board.

# 2.4 Interviews with Children

A group of 29 children from 4 1/2 to 14 years old from two Supervised Access centres was interviewed. The centres were selected because they were relatively easy for interviewers to travel to, had a relatively large number of families enroled in their program, and because they had agreed to assist by informing parents about the study, and to provide a private room for the interview. About half the children (N=14) were 4 to 6 years of age while 15 children were 7 years of age or older. The interview protocol consisted of 12 questions that focused on the child's experience of coming to the centre, as well as his or her understanding of various aspects of the centre, including the purpose of visiting there, centre rules, and the role of staff members.

# 2.5 Interviews with Judges and Lawyers<sup>7</sup>

Separate interview protocols, each having a similar semi-structured/open-ended format, were designed for a telephone interview.

The judge interview guide focused on the following areas: community awareness and demand; background questions regarding supervised access cases; legal impacts; and, general respondent information. The lawyer interview guide was similar to the judge's guide except for the omission of the section on background questions regarding supervised cases and the addition of the section on background questions regarding legal practice.

<sup>&</sup>lt;sup>7</sup>Original plans called for interviewing six court services managers. It was believed this group could provide additional useful information about the functioning of Supervised Access centres, particularly in terms of the centre's interactions with the courts. Names were provided by the Ministry of the Attorney General. The interview guide developed for this group was similar to the judge's guide. We have not included the results of the interviews in this report because a) only two managers felt that they were well enough informed to participate; and b) only one of these managers appeared to have a good understanding of Supervised Access.

Each Supervised Access centre coordinator<sup>8</sup> nominated two judges and two lawyers who knew about the Supervised Access program. Judges and lawyers were then contacted via phone by a member of the research team who described the purpose of the study, and asked them to participate in a thirty minute phone interview. These interviews were carried out by two senior members of the team who were familiar with the study, and knowledgeable about the legal system. One member is a lawyer; the other member is a psychologist whose research specialty is psychology and the law. Since the design of the study required only one judge and one lawyer associated with each Supervised Access centre to participate, those who first consented to participate were interviewed. (Note: nominated lawyers associated with the Belleville, Midland and York Region sites were unable to be interviewed, thus it was decided to interview both nominated lawyers associated with each of the Durham, London and Toronto Supervised Access sites.) After they had agreed to participate in the study, judges and lawyers were sent a copy of the interview guide.

# 2.6 Intake and Exit Forms

Early on in the evaluation, the project team developed intake and exit forms. They were designed to assist Supervised Access centres to collect information about the clients they served, and to provide additional information for the evaluation. The forms were distributed to the centres by the Ministry. Centres were instructed to fill out these forms when families joined or left their program.

Toward the end of the project, we obtained a sample of these forms to analyze. We found that so many agencies had modified these forms or had neglected to systematically complete them, that the degree of missing data made it very difficult to interpret any findings. For many of the variables of interest 50% - 70% of the cases

<sup>&</sup>lt;sup>8</sup>Except for York Region. In this case names of judges were not provided; therefore, a research member contacted the Family Court Division in Newmarket and asked for the name(s) of the judge(s) most involved with the Supervised Access program.

The reasons given were: not enough time; not adequately informed, and on maternity leave.

had missing values. For this reason, we will not report the results here.

# 2.7 Limitations of the Study

The limitations of this study result from several factors. One factor was the need to investigate a large number of issues, which are presented in Table 1.3. In order to address all these issues it was necessary to design a study which collected a broad range of information. As a consequence the study could not restrict its focus and investigate in-depth a few aspects of Supervised Access.

Also affecting the study was the lack of previous empirical research on Supervised Access. This required us to collect a considerable amount of basic descriptive information. Moreover, it was necessary to develop our own data collection techniques, and adopt a 'broad brush strategy' because previous work could not be reviewed to identify critical aspects of supervised access.

The study was also influenced by the decision to fund 14 different centres to deliver Supervised Access. The centres are similar to each other because they must conform to Ministry criteria, and also because their activities were monitored by staff from the Ministry of the Attorney General. They differ, however, in several respects, making it tempting to try and determine what impacts these differences had on the operation of Supervised Access. At several points in the report we have tried to do this, but have found it difficult to draw conclusions about the impact of centre differences because there are relatively few centres (14), and these centres differ from each other in several ways.

Also affecting the study was the decision not to use an experimental design. There are a few reasons for this. First, in order to conduct a true experiment, the Supervised Access Pilot Project, would have had to have been set up as an experiment. This was not done, perhaps because of the difficulties involved in setting up a program as an experiment. Specifically, in order to set up this study as a true experiment, the Ministry of the Attorney General would have had to ensure that some of the families

selected for Supervised Access were randomly assigned to Supervised Access centres (the treatment group), while other families, who otherwise would qualify, would not be permitted to use this program (the control group). It also would have been necessary for the Ministry to obtain agreement from the primary stakeholders (the court system, lawyers, and centres) about the experimental nature of Supervised Access.

An alternative to a true experimental design is a quasi-experimental design. In this type of design, potential clients are not randomly assigned to the treatment and comparison groups. Instead, a comparison group of non-participants is selected so that it matches the treatment group on factors believed to affect outcome measures of interest to the study. If the treatment and comparison groups are equivalent apart from the experience of the treatment group with Supervised Access, the difference between the two groups provides an estimate of the impact of Supervised Access. The primary methodological difficulty in successfully using this design lies in the selection of a good matched comparison group. Selecting a good matched comparison group is difficult because researchers need to have a good idea about what factors influence the outcome measures of interest in order to control for these factors. This is hard even when there is a considerable body of prior research to help identify important matching variables. In the case of the current study the problem is even greater because of a virtual absence of empirical literature to help identify the variables on which matching should occur. For this reason, and also because few of the issues listed in Table 1.3 required such design, this study did not adopt this approach. As a consequence, it is difficult to draw strong conclusions from this study about the true impact of the program on parents, children, and the legal system. 10

## 2.7.1 Limitations of Particular Data Collection Methods

Each of the methods used to collect data for this study has strengths and weaknesses. Here we briefly identify the primary limitations of each major method used to collect

<sup>&</sup>lt;sup>10</sup>Interestingly, as we point out later on the report in section 3.6, using an experimental design would not have permitted the study to investigate some of the potentially important impacts of Supervised Access on the legal system.

data.

Monthly Statistical Reports. The monthly statistical reports provide a useful statistical profile of Supervised Access. The primary difficulty, missing data, is probably not too serious.

<u>Survey of Custodial Parents</u>. Although the short version of the survey, answered by 121 parents, permitted us to report general findings, sample size did not permit a more in-depth investigation of findings.

Interviews with Parents at Two Points in Time. The component of the study that interviewed parents at two points in time was limited because of sample size. In addition, this part of the study, which aimed at investigating changes in parental attitudes and behaviour, may not have found such effects because only six months elapsed between the two administrations of the questionnaire, and also because few parents in the sample had changed their access arrangements.

The Behaviour Rating Instruments. The instruments used to determine the presence of emotional and behavioral problems in children, are well regarded screening instruments. Perhaps the most serious limitation is the possibility that custodial parents, may not have accurately reported their child's behaviour.

Interviews with Coordinators, Other Staff, and Volunteers. Of the three groups questioned, the coordinator interviews were the most informative, while the volunteer interviews were the least useful probably because of their limited involvement with Supervised Access. An important limitation of these results is that each group typically consists of only 14 observations, or one observation per centre.

Interviews with Parent Organizations, Advisory Board Members, and Community Group/Agency Members. An important limitation of the data from these interviews is that they are based on small numbers of observations, about 14 per group. In addition, some of the community group/agency representatives did not appear to be very familiar with the Supervised Access centre.

Interviews with Children. When reading the comments made by children, one must keep in mind that many of these children may feel conflicting loyalty between their parents who are in high conflict with each other. In addition, there is the possibility that some of the comments and views of children reflect the views of their parents. Finally, it should be noted that a convenience sampling technique was used, and as a consequence it is possible that the sample of children interviewed was not representative of the population.

Interviews with Judges and Lawyers. A limitation of the results based on interviews of judges and lawyers is that they are based on only 14 interviews with each group. A second shortcoming is that both groups were asked questions about the impact of Supervised Access on the courts and legal system. These questions are difficult to answer accurately, particularly if the answers being provided are based on one's impressions, and not on systematically collected data.

## 3 FINDINGS

## Overview

Before presenting a detailed set of results, it may be easier for the reader to make sense of these findings by presenting an overview of the 14 Supervised Access projects, and a brief thumbnail sketch of a typical Supervised Access centre. As Table 3.0.1 shows, the 14 Supervised Access projects were scattered throughout Ontario. Some projects were in large, urban areas in southern Ontario, while others were located in relatively isolated communities, serving rural residents. Although many projects are in southern Ontario, several were located in the northern part of the province. Most programs were administered by a larger centre, although the programs in Cornwall and Toronto were not. Most programs did not exist prior to receiving funding from the Ministry of the Attorney General for the Supervised Access pilot project. Several projects were located in two or more sites. The facilities consisted of either a large room that could accommodate several families or several small rooms each of which could be used by a single family.

	Υ	<del></del>			<del></del> -				
User Fees	Yes	Yes	ON	Yes	Yes	Yes	ON	ON.	Yes
Hours of Visits/ Exchanges	Weekdays & Weekends,	Weekdays & Alternate Weekends	Some weekdays & weekends	Weekends	Weekdays & Alternate Weekends	Weekends	Weekends	Weekends	Weekdays & Weekends
Number of Paid Staff	(1) F (2) P	(1) F	(1) F	(3) 5	(2) P	d (8)	(1) F	(3) P	(1) F (10) P
Education of Coordinator	Community College	College	(1)Post Secondary (1)BA	8A	B.A.+	Post Secondary	BA	BSW	Post Secondary
Coordinator (F.Full.time P.Part.time)	u.	u.	(2)F	U.	ط	۵	u.	٩	u.
Number of Sites	4		S.	2	1	<b>.</b>	1	2	2
Was Supervised Access in Operation at time of the Proposal?	z	Z	z	٨	¥	Z	Z	¥	z
Name of Larger Agency	Counselling Services of Belleville and District	Volunteer Brant	YMCA	Lutherwood	Merrymount Children's Centre	Kinark Child and Family Services	Crisis Centre North Bay	Children's Aid Society of the Region of Peel	Family and Children's Services of the District of Rainy River
Size of Community	128,000	115,000	409,075	356,421	361,522	300,000	20,000	700,000	24,000
	Belleville	Brantford	Ourham	Kitchener/ Waterloo	London	Widland	North Bay	Pee1	District of Rainy River

# "Weekends - include Friday, Saturday and Sunday

User	Yes	Yes	Yes	Yes, for reports & court appearances	No
Hours of Visits/ Exchanges	Weekdays & Weekends	Weekdays & Weekends	Weekdays & Weekends	Weekends	Some Weekdays & Weekends
Number of Pald Staff	(1) P F	(1) F (6) P	(4)P	(1) F (3) P	(1) F (4) P
Education of Coordinator	. 8A	BA	BA	BSW	Community College
Coordinator (F.Full.time P.Part.time)	ů.	U.	a.	LL.	ſ.
Number of Sites	1	1	е	-	-
Was Supervised Access in Operation at time of the Proposal?	Z	Z	Z	z	z
Name of Larger Agency	Algoma Child and Youth Services	Children's Achlevement Centre	Vaughan Neighborhood Support Centre	Independent	Independent
Size of Community	131,000	262,075	477,000	3,893,046	000'12
	Sault Ste. Marie	Windsor	York Region	Toronto	Cornwall

As mentioned previously, the central goal of a Supervised Access centre is to provide an opportunity for visits and exchanges to occur between children and non-custodial parents in a safe and neutral environment. A typical Supervised Access project has a coordinator, one or two other paid staff, and volunteers. Generally the coordinator is responsible for the overall adminstration of the Supervised Access centre. He or she (in almost all centres in Ontario this is a woman) also spends much of his or her time interacting with parents, negotiating visits and arrangements. The other paid staff often are responsible for supervising visits -- spending time meeting with parents as well as monitoring the visit itself. Volunteers frequently spend much of their time monitoring visits, ensuring their safe, smooth functioning. While volunteers may identify issues requiring some action or intervention, paid staff are responsible for making decisions about visits (e.g, terminating a visit).

Someone observing a typical visit would probably see two or three non-custodial parents each playing with their child or children. The child or children are usually under eight years of age. Visits usually occur every two weeks, take place on a Saturday or Sunday, and last two or three hours. The frequency and duration of the visits are usually determined by the court.

About 15 minutes before a visit, the custodial parent and child arrive at a Supervised Access centre and meet briefly with a staff member. The custodial parent then leaves the premises or goes to a waiting room. The child is then taken by staff into a large, bright well-equipped room that frequently serves as a day care centre during week days. There, the child plays a game or chats with a staff member for 5-10 minutes until the non-custodial parent arrives. The non-custodial parent and child then play or talk while a staff person monitors the interaction. From time to time the parent or child will talk to staff, but few of the staff interactions with the family are designed to change the behaviour of the child or adult. When the visit is over the non-custodial parent says goodbye to the child and may leave the premises. Alternatively, the non-custodial parent may wait in a separate room until after the custodial parent has left. In either case, the departure and arrival of the two parents is staggered so that parents will not meet each other. Shortly after the non-custodial parent says goodbye to the child, the custodial parent arrives, chats briefly with staff, and then leaves with her/his

child. After the visit, staff write up a brief factual report describing what occurred during the visit. In addition to providing information used by the centre, these reports also may be used by the court and lawyers.

# 3.1 Centre and Community Perspective

This section presents the views of the centre and community about Supervised Access. To obtain the centre's perspective we interviewed coordinators and other staff twice and volunteers once. The coordinator interviews were considerably longer and more detailed than the staff and volunteer interviews. In areas where the interviews overlapped, there tended to be agreement, although coordinators had a broader and deeper understanding of the centre's operation. In addition, we interviewed one person from each advisory board or Board of Directors, and for those centres that were part of a larger organization (all centres except Toronto and Cornwall), we interviewed a representative from the larger organization, who was familiar with the centre.

The community agency perspective was obtained by interviewing a least one representative from an agency (see Appendix A for names of agencies) that had been in contact with the centre. We also interviewed community lawyers and judges, and will report these findings in section 3.6.

The results of the coordinator and other staff interviews will be presented in sections according to the organizational framework developed by Meltsner and Bellavita (1983). In this framework an organization is described in terms of the following categories: Goals and Objectives, Environment, Resources, Organizational Structure, Decision-Making, and Communications.

# Goals and Objectives

Organizations are a means to achieve goals. In the case of the Supervised Access Pilot Projects, the general goals and objectives of each centre were defined by the Ministry of the Attorney General, the funder. For this reason it is not surprising that all centres have stated that the primary goal or objective of supervised access is to provide an opportunity for visits between children and non-custodial parents to take place in a safe and neutral environment. This goal is also the central objective of the Ministry. In terms of the other stated goals of Supervised Access program (e.g., a positive experience for children), it was difficult to determine whether this had any impact on centre operation and client satisfaction.

Beneficiaries of Supervised Access. Coordinators were asked whom they thought benefited most from Supervised Access, and then who else benefited. As results in Table 3.1.1 show, 10 of the 14 coordinators believed that children benefited most, and 4 felt that the non-custodial parent benefited most. Similar views were expressed by advisory board members, and members of umbrella organizations.

In addition to exploring their views of the beneficiaries of Supervised Access, coordinators were asked to estimate what percentage of parents and children benefited from Supervised Access, what percentage were unaffected, and what percentage were harmed, in order to determine whether coordinators believe that sub-groups of clients are unaffected, or harmed by Supervised Access.<sup>14</sup> Results, summarized in Table 3.1.2, show that coordinators believed that almost all custodial parents, non-custodial parents, and children benefited from Supervised Access, although 5 to 10% may have been adversely affected by being in the program. Results also suggest that the beneficial impact of Supervised Access on children is believed to be less for older

<sup>13</sup> It is interesting to note that none of the coordinators nominated the custodial parent as the primary beneficiary of Supervised Access, despite the fact that custodial parents express greater satisfaction with the Program than non-custodial parents. It is possible that the importance of Supervised Access Programs to custodial parents is underestimated. While it is easy to focus on children and non-custodial parents, for whom in many cases there would be no contact if the service did not exist, safety of the environment for themselves and their children is an important feature of supervised access for custodial parents.

<sup>&</sup>lt;sup>14</sup>In this question, coordinators were asked about their beliefs about the impact of the program on parents and children. Thus, the term 'benefited' should be interpreted to mean better off than they would have been in the absence of the program, and the term 'harmed' should be interpreted to mean that the clients were worse off than they would have been in the absence of the program.



children. Many coordinators stated they felt uncomfortable answering this question because their answers may not have been accurate. They based their views on observations and discussions with children, discussions with parents in the programs, and other parents no longer in the program.

TABLE 3.1.1

Coordinator Views of Who Benefits From Supervised Access

GROUP	MOST BENEFITS	BENEFITS
Entire Family	0	1
Custodial Parent	0	12
Non-Custodial Parent	4	13
Child(ren)	10	14
Court System	0	6
Other	0	6

Coordinator Views of
Who Benefits, is Unaffected, or is Harmed by Supervised Access\*

**TABLE 3.1.2** 

GROUP	% BENEFIT	% UNAFFECTED	% HARMED
Custodial Parent	84	6	10
Non-Custodial Parent	89	. 6	5
Children Under 5*	94	1	5
Children 5-10	89	1	10
Children over 10	79	15	6

<sup>\*</sup>This table should be interpreted with caution. It is based on the views of 14 coordinators; many did not feel that they were in a position to answer this question accurately. They were particularly uneasy when asked to estimate the benefits for children.

Other beneficiaries seen by the advisory board and umbrella organizations were the legal system and the community. According to these groups, the court benefits by having access to reports from Supervised Access staff and can therefore make more informed decisions regarding custody and access. The community benefits, it was suggested because children who know both parents tend to be more well rounded adults. These groups also suggested that Supervised Access also reduces the amount of time spent in the court system reducing legal costs and use of public money.

Policies and Procedures. An organization's policies and procedures are a primary means of fulfilling its goals and objectives. For this reason, it was important to evaluate Centre policies and procedures. Perhaps because centres were small and most had been in operation for only a short time, many had few formalized policies and procedures other than policies set by the Ministry. To examine the relationship between goals and the policies and procedures designed to fulfil these goals, coordinators were asked to describe the two most important policies or procedures in effect at their centre. The policies most often mentioned were those associated with safety and neutrality, with intake procedures coming a close third. The importance of safety and neutrality policies is congruent with the Ministry focus on these aspects of Supervised Access. Other policies and procedures mentioned were cancellation/lateness/no show policies, staggered arrivals and departures, and who is allowed to stay for visits. According to the coordinators, about half of these policies and procedures were developed by the centre, one third by the Attorney General, and 15% were developed by both of these agencies.

Almost all centres reported that they had introduced new policies since opening. The policies fall into the following fairly small group of categories:

- safety (e.g., improved fire/emergency procedures);
- intake procedures (e.g., guidelines/agreements must be signed by both parents);
- lateness/no shows/cancellation (e.g., changed policy on no shows; now no shows do not automatically result in discontinuation of service);
- visits (e.g., custodial parents must approve of who can stay during a visit ahead of time; physical discipline not permitted).

Admission Criteria. All 14 coordinators reported that their centre had developed an admission policy which set out criteria that clients had to satisfy before being admitted into the program. Criteria are listed in Table 3.1.3. The figures represent the number of coordinators who reported that the condition needed to be satisfied before a family was admitted into the program. It may be thought that these criteria would be hard to meet. This does not appear to be the case. Although the pilot project had been in operation for over a year when the question was asked, a total of only about 30 families had been refused service at all 14 program locations, because they failed to satisfy one or more of the admission criteria.

TABLE 3.1.3

Conditions to be Satisfied Before Accepting a Referral<sup>15</sup>

CRITERIA	NUMBER
Agreement by Both Parents to Rules of SAP	12
No CAS Involvement	2
Risk Factors Deemed not Severe	3
Court Order/Written Agreement	7
Signed Consent Forms	6
Satisfactory Intake Interviews	8
Other	6

These conditions were spontaneously generated by coordinators at the time of the interview. For this reason these conditions should be viewed as an indication of the salience of the criteria to be satisfied. Viewed in this way, the most salient requirement was for both parents to agree to the rules of Supervised Access. The least salient requirement was to ensure that there was no CAS involvement, possibly because the issue seldom arose; a Ministry requirement for accepting a family is that there should be no CAS involvement.

Safety. Because of the population being served, Supervised Access programs are concerned about the safety of their clients, staff, and volunteers. Agencies took a number of precautions to ensure safety. Some of the more common precautions included careful supervision of visits by staff trained in intervention and conflict resolution strategies, the use of locking doors, alarm systems, security necklaces worn by staff, staggered arrival and departure times for custodial and non-custodial parents, escorts to car, direct electronic access to police, and separate entrances for custodial and non-custodial parents. Although it is understandable why these precautions are taken, it might be argued that the precautions are too elaborate, given that only a small number of critical incidents relative to the total number of visits have been reported since the pilot project began. Still, when asked, all coordinators believed that the precautions taken by their centre were necessary. Some coordinators stated that the precautions helped prevent incidents and that they reassured custodial parents, some of whom were anxious about their own safety, and that of their child. Coordinators also had considered further changes that they would make to their centre's safety procedures. Ideas included more volunteers, installing an alarm system and, at one centre, creating a two-tier system of visits with higher-risk clients visiting when an off-duty policeman was present.

As shown in Tables 3.1.4 and 3.1.5, coordinators and staff believed that almost all parents, staff and children felt safe in their Supervised Access program. Average ratings were around 90% for each of these groups. The one exception was a lower average coordinator rating for children (80%) which occurred because of low ratings by a few coordinators (the median rating was that 92.5% of children felt safe). The centres with the lowest rating of safety for children were North Bay, York, and Windsor.

TABLE 3.1.4

Coordinator Views about the Perceived Safety and Neutrality of Supervised Access by Different Groups

GROUP	% SAFE	% NEUTRAL
Custodial Parents	92	89
Non-Custodial Parents	98	86
Children (5 years and older)	80	93
Staff	94	N/A
Volunteers	97	N/A

TABLE 3.1.5

Staff Views about the Perceived Safety and Neutrality of Supervised Access by Different Groups

GROUP	% SAFE	% NEUTRAL
Custodial Parents	86	87
Non-Custodial Parents	90	80
Children 5 and Over	93	95
Staff	95	N/A
Volunteers	95	N/A

Neutrality. Coordinators and staff also felt that most parents and children believed that the program was neutral. These judgements are generally congruent with parent reports of satisfaction with respect to safety and neutrality, and are also consistent with reports by advisory board members, representatives of umbrella organizations, and the views of most community agencies. Interestingly, however, four representatives of community agencies questioned the centre's neutrality. The groups expressing concern about the centre's neutrality operated from an advocacy perspective. Three of these groups were women's shelters that helped battered women, and one represented a men's rights group. All representatives of women's shelters interviewed were in favour of the concept of Supervised Access, but some felt that the particular centre in their community had acted non-neutrally in some cases. One men's group representative supported the concept of Supervised Access, while the other men's rights group representative was opposed to the concept of Supervised Access, arguing that it prevented many men from having unsupervised access to their children. We are not familiar with the cases in which some women's shelters felt centres acted non-neutrally and cannot report about whether their concerns were justified. The results from the surveys of parents and interviews with staff suggest, however, that there is general satisfaction with the neutrality of centres, although it is acknowledged that this is a difficult issue at times.

Four of the 14 staff members interviewed reported that they found it hard to behave neutrally, with a difficult situation arising about once a month. Several types of difficult situations were described, including: deciding when to facilitate parent/child interaction; deciding when to talk to a parent about her/his behaviour or language; deciding how to respond when a parent recounts a story and requests support; or deciding how to respond to a child's comments about one of her/his parents. This result suggests that more attention may need to be paid to the issue of neutrality in the pre-service and in-service training of staff.

### Environment

An organization is affected by individuals and other organizations in its environment. The environment makes demands, supplies resources, and imposes constraints on the organization.

With respect to Supervised Access, the "environment" includes the larger organizational context in which the centre is located (for those centres that are part of a larger organization) and the community which the centre serves. These aspects of the environmental context may have implications for the structures and processes that comprise the centre and the quality of its service.

Organizational Context. Clearly, one of the most salient aspects of organizational context is whether the Supervised Access centre exists as a stand-alone agency or is part of a larger organization. Only two centres fall into the former category: Toronto and Cornwall. The impact of this variable on start-up seems mixed. Cornwall's independent status led to long delays in commencing operation because it took a long time to incorporate the centre. The Toronto centre did not experience this delay because it had been incorporated a number of years ago when it operated under the same name in Etobicoke.

Being part of a larger organization may also affect administrative support as well as decision making. Most centre coordinators reported using facilities or equipment belonging to the parent organization, and receiving clerical support from it. Most coordinators were satisfied with the level of support received.

Coordinators and advisory board members whose programs were part of a larger organization were asked to identify the primary advantages and disadvantages of that arrangement while coordinators of stand-alone programs discussed the strengths and weaknesses of being independent. Coordinators and advisory board members linked to larger organizations tended to report that the most important advantages of being linked were support for the program through use of the larger organization's facilities and infrastructure for staff hiring and training, use of policies and procedures already in place and access to their support staff. In addition, they reported that being linked to a larger organization can enhance the profile and credibility of the Supervised Access centre, and can make it easier to network and problem solve within the community. Being part of a larger organization can also have its drawbacks. Coordinators reported that larger organizations have lines of authority that can delay change. It may also mean that space and other resources need to be shared.

Difficulties can also arise if there is a difference between the mandate of the two organizations. For example, although the mandate of a Supervised Access program does not include treatment, the larger organization to which it is linked may function centrally as a treatment centre. This can present problems if the larger centre does not wish to accommodate a program that is not treatment oriented, or does not agree with the neutrality stance required by the Ministry. Finally, a few coordinators pointed out that being linked with a Children's Aid Society (CAS) can be a liability because of the stigma in the community of receiving service from a program associated with CAS.

The coordinators and advisory board members of independent programs reported that advantages of independently run Supervised Access centres were that they had greater flexibility and could work without getting entangled in a bureaucracy. On the other hand, there is no administrative support.

When coordinators were asked whether they would prefer to be part of a larger organization or be independent, 10 of the coordinators, all of whom led Supervised Access programs that were linked to a larger organization, felt that a linked arrangement was preferable. The remaining 4 coordinators felt that the Supervised Access program could function more effectively on its own.

The coordinator of the Toronto centre (Access for Parents and Children in Ontario) provides insight into the operation of a stand-alone centre. She reported that she was initially attracted to her position at the centre partly because of its stand-alone structure. She had previously worked to implement a clinical service program involving three different agencies and experienced frustration and delays as a result of dealing with a large hierarchy and with inter-agency conflicts. She stated that, as part of a larger organization, a centre becomes subject to its policies and is necessarily less independent than a stand-alone program. In addition, having to "go through channels" for decision-making slows down the implementation of policies and procedures and thus interferes with service delivery. The coordinator reported being very satisfied with the fact that "there is just me and the board." She described the Board as very supportive and helpful. She feels that she has excellent access to Board

members when necessary, and meets every three weeks with one of the members to discuss centre business. The coordinator also reported that she was very clear with the Board about where she will engage in independent decision-making and where she will seek the guidance of the Board. She stated that an important quality of a successful coordinator is to be very self-assured and clear about what one can and cannot do.

In terms of facilities, the coordinator described renting a space that provides furniture and equipment for a very modest amount through a program of the Ministry of Community and Social Services. This program runs a daycare and the Supervised Access centre has access to all the toys and facilities of the daycare, including an indoor playground. Office space is rented from the Family Service Association at a different location. This is where intake interviews and some exchanges are conducted. Because there are always social workers or support staff in the building during the day, the coordinator does not feel vulnerable when interviewing a potentially volatile parent. As a result, the coordinator reports that she has most of the advantages of being part of a larger organization without the bureaucratic structure that is a potential hindrance to the program.

Clearly, this coordinator perceives many advantages to the Toronto centre's independent status, and (at least from her point of view) there seems to be a good fit between the coordinator and the Board. However, her comments also suggest that the success of such a management model depends on a coordinator who has the qualities described by the respondent. A coordinator who is less independent and self-assured might have a very difficult time in a stand-alone organization, where there is less institutional structure and authority in place to guide decision-making. Conversely, coordinators who are successful as part of a larger organization may need to possess particular skill and patience in furthering centre objectives within the context of the larger structure. A highly independent individual for whom patience and diplomacy are not strong qualities might have a difficult time operating a centre that is part of a larger structure. In addition, it may be that large programs like Toronto's work well independently, but that a stand-alone model would be less successful if implemented in a small program.

Community Context. Each of the Supervised Access centres also functions within a community context. Our interviews indicate that family court judges and family lawyers are a key aspect of the community for the Supervised Access program because almost all referrals to Supervised Access are made by these individuals. Other groups providing referrals are organizations that help parents such as shelters and YMCA/YWCAs.

The communities served by a Supervised Access program differ from each other in ways that affect Supervised Access. One difference is community size, which ranges from 24,000 to over 3,000,000 residents. Community size appears to be one determinant of use of service, and can also affect service delivery. For example, in one small community the staff person supervising visits of one family was a friend of the non-custodial parent. To avoid a perception of non-neutrality, the program assigned a different staff person to this family.

Another relevant factor is the ethnic or racial composition of the community. In our interview in Fort Frances, a northern community in the District of Rainy River with a large Aboriginal and First Nations population, we found that very few clients of Supervised Access centres were Aboriginal or First Nations persons, and that the coordinator felt it unlikely, after talking to them in the community, that they would use the program in the future. There appear to be a variety of reasons for this. One factor seems to be that in some communities Aboriginal and First Nations are developing their own distinct legal system and network of community services.

# Organizational Structure

An important feature of modern organizations is that they have a hierarchical structure, consisting of many distinct operating units, each with its own administrative structure. The degree of differentiation and organizational structure depends, in part, upon the size of the organization (e.g., Chandler, 1977). Supervised Access centres are small organizations often employing fewer than ten people. Centres usually report to a larger organization, or are independent organizations accountable to a Board of Directors. The tasks performed by staff overlap, and the programs have a relatively undifferentiated, flat organizational structure.

## Members

Supervised Access programs are usually small. A typical centre would consist of a coordinator, a few staff and several volunteers, the majority of whom were female. The key member of each centre was the coordinator who was usually, but not always, a full-time employee. She/he had overall responsibility for the effective operation of the centre. Much of the coordinator's time was spent meeting and talking to parents and lawyers.

Whether part of a larger organization or a stand-alone centre, coordinators, advisory board members and representatives of parent organizations tended to agree about the qualities needed by an effective coordinator. The skills fell into the following categories:

- communication/social/negotiating skills;
- ability to be empathic yet remain neutral and non-judgemental;
- professional training with a social work or clinical background;
- good organizational and administrative skills; and
- flexibility.

Staff. In this section we focus on paid staff other than coordinators. Most staff (85%) interviewed had worked at their program for more than a year. Turnover rates of staff were relatively low. On average, one staff person per program had left the Supervised Access program since the program had begun to operate. In contrast more volunteers had left-about 8 volunteers per program on average--though, of course, most programs had many more volunteers than staff. In many cases volunteers had left because they had fulfilled a course requirement, or had gained the practical experience they were seeking. Coordinators reported that on average they could replace a staff person within about 4 weeks, and a volunteer within 3 weeks. The median time estimated to train was 4 weeks for staff, and 1 week for volunteers. Coordinators reported that obtaining qualified staff and volunteers was not time

<sup>&</sup>lt;sup>16</sup>Most centres have very small numbers of paid staff and rely on volunteers to provide the "person power" necessary to monitor visits. However, due to difficulties recruiting volunteers, two programs (Midland and the District of Rainy River) have elected to hire more staff in lieu of volunteers. In the District of Rainy River, the staff work on an asneeded basis.

consuming once the program was underway, and that obtaining suitable staff and volunteers was surprisingly easy. One coordinator attributed this, in part, to the high unemployment rate in her community and throughout Ontario.

Staff reported that a variety of issues were addressed during their initial training. As shown in Table 3.1.6 the issues covered more frequently included safety and neutrality, roles and responsibilities of staff, and procedures of the Supervised Access program. Over two thirds of the staff felt it was necessary to obtain further training on issues such as safety, effects of divorce and custody on families, and crisis intervention. The discussion of policies and procedures in the Goals and Objectives section, above, suggests that neutrality should also be addressed in further training.

TABLE 3.1.6

Issues Raised During Training of Staff

ISSUE	FREQUENCY
Neutrality	5
Dealing with Angry or Disturbed Clients	2
Effects of Divorce and Custody on Families	2
Safety	8
Interacting with Children	1
Writing Observation Notes	2
Roles and Responsibilities of Staff	6
Crisis Intervention	4
Reasons for Referral	3

TABLE 3.1.7

Satisfaction of Staff with Various Aspects of Job

ASPECT OF JOB	LEVEL OF SATISFACTION			
	SATISFIED	NEUTRAL	DIS- SATISFIED	
Hours of Work	6	3	4	
Safety	13	0	0	
Training	10	2	1	
Supervision by Coordinator	11	1	1	
Interactions with Parents	8	4	1	

On the whole, staff were very satisfied with their jobs as shown in Table 3.1.7. The area of greatest dissatisfaction was hours of work. When asked, staff who were dissatisfied stated that they wanted to work more hours.

Interviews indicated that coordinators, staff, and volunteers were well qualified for their jobs, both in terms of education and experience. Differences between groups were in the expected direction, with coordinators having the most educational and work experience, followed by staff members and then volunteers. For coordinators, the minimum educational level attained was a community college diploma, although most were better educated. Seven had undergraduate degrees (5 of whom had additional community college diplomas) and 3 had graduate degrees in Social Work. Most of the coordinators had several years experience working with either troubled children, adults, or families. Interviewed staff had either an undergraduate degree or community college diploma.

A difference between coordinators and other staff at the Centre was in the kind of experience they possessed rather than the amount. While most staff had several years work experience with children and/or families, none, other than coordinators, had experience with the Court system, child welfare, or custody and access. A number of coordinators had worked in these areas. Data from the centre interviews indicated that staff generally had more educational qualifications and experience than volunteers. However, the level of education and experience of volunteers were generally good as well; 8 of the 11 volunteers interviewed had an undergraduate degree or community college diploma, and only 2 had less than one year's experience in work related to children and/or families.

## Tasks

Although each program functioned a little differently, coordinators tended to be responsible for day-to-day planning and administration. Coordinators also were usually responsible for intake, training, and contacting lawyers and parents. Other staff at centres tended to be responsible for interacting with parents and often were responsible for supervising visits. Some coordinators also spent time performing these functions. Volunteers usually spent their time monitoring visits.

Coordinators spent on average 40.6 hours per week at their job. Table 3.1.8 shows the three most time consuming activities of coordinators. As this table shows, coordinators were involved in a variety of activities including contact with clients and with lawyers for reasons other than visits or exchanges, conducting intake interviews, supervising and training staff and volunteers, and performing administrative duties. The communication function carried out by coordinators is discussed further in the Communications section, below. The question of the relationship between the amount of coordinator time spent with clients and parental satisfaction with the centre was examined in the section on Factors Related to Overall Satisfaction. This variable did not predict overall satisfaction.

On average, in the week prior to their interview with a member of the research team, staff other than the coordinators worked 15.2 hours. As shown in Table 3.1.9 the majority of their time was spent in visits, typically monitoring the child without interacting. Other activities included helping parents and children interact, for example, by finding toys, and writing observation notes.

TABLE 3.1.8

Three Most Time Consuming Activities for Coordinators

ACTIVITY	TIMES MENTIONED
Contacting Clients for Reasons Other Than Visits or Exchanges	9
Administrative Duties	8
Contacting Lawyers for Reasons Other Than Visits or Exchanges	6
Supervising/Training/Recruiting Volunteers or Staff	6
Conducting Intake Interviews	5.
Supervising Visits or Exchanges	. 3
Arranging Supervised Access or Exchanges	2
Completing Observation Notes	2
Other	1
Contacting or Appearing in Court	0
Contacting Social Service Organizations	0
Total	42

TABLE 3.1.9

Most and Second-Most Time Consuming Activities for Staff Other Than Coordinators

ACTIVITY	MOST TIME CONSUMING	SECOND MOST TIME CONSUMING
Talking to Non-Custodial Parent	1 ·	3 -
Talking to Custodial Parent	0	1
Talking to Child	1	1 ,
Helping Parent and Child Interact <sup>17</sup>	0	3
Monitoring Parent and Child without Interacting	9	0
Writing Observation Notes	0	3
Contracting Lawyers and Other Referral Sources	0	1
Other	2	1
TOTAL	13	13

<sup>&</sup>lt;sup>17</sup> Staff helped parents and children interact by doing such things as finding toys, and suggesting activities.

As shown in Table 3.1.10 most staff (9) reported that their primary objective during a visit was to monitor the participants while three felt that their primary objective was to ensure that the visit was positive. About half the staff reported that situations arose during visits, that made them feel uncertain about what to do. For example, the visiting parent may have spoken inappropriately about the other parent, or may have been too rough or spoken too harshly to his or her child. Depending upon the severity of the incident staff would either do nothing, speak to the parent, terminate the visit, or refer the matter to the coordinator.

TABLE 3.1.10

Most Important Responsibility of Staff During a Visit

RESPONSIBILITIES	MOST IMPORTANT
Monitoring to Ensure Safety of Child	9
Ensuring a Positive Visit	3
Ensuring Child is Happy	0
Preventing Conflict between Parents	0
Collecting Information for Observation Note	0
Greeting Parent and Children	0
Other	1
TOTAL	13

### Resources

Resources refer to the means that an organization has available to accomplish its objectives. Supervised Access projects have financial resources, human and social resources, and physical resources.

Financial resources for Supervised Access projects come almost entirely from the Ministry of the Attorney General. A small amount of additional funding comes from user fees, and a few programs receive funding from other sources. This money is largely spent on salaries and benefits, with additional money allocated to such items as insurance, rent, and telephone.

Table 3.1.11 shows financial expenditures for 1993 for each centre. Expenditures varied across centres but were typically in the \$60,000 - \$80,000 range.

Human Resources. The human resources in centres typically consist of a coordinator, paid staff, and volunteers. Table 3.1.11 shows the average number of hours staff and volunteers worked per centre. Perhaps the most notable feature of this table is differences across centres in their use of volunteers. Two centres (District of Rainy River and Midland) have reported no time spent by volunteers, while other centres have reported that volunteer hours per month are close to, and for Brantford and York Region actually exceeded, time spent by staff.

<u>Physical Resources</u>. The facilities in which supervised access programs operate are the primary physical resources. Centres differ in terms of their facilities. Some programs provide visits in a large room where all visits take place, while others provide visits in multiple rooms, with some rooms accommodating only a single family. This difference was not found to be related to parental satisfaction with the program.

Other aspects of the physical environment that differed were the presence or absence of parking facilities, presence or absence of a waiting room, the safety range of features present in the program, and the extent to which toys and equipment were available to the families. We found when we inspected the sites that they were generally well set up and equipped for children under 9 or 10 years of age, but were less suitable for older children. These aspects of the physical environment did not appear to affect parental satisfaction.

Table 3.1.11

1993 Program Resources

CORNWALL	42 \$70,546	.6 277.8	70.7 41.3
TORONTO	\$120,142	377.6	
YOAK REGION	\$74,415	124.1	143.75
WINDSOR	\$67,900	255.2	33.3
SAULT STE. MARIE	\$78,223	263.5	89.0
DISTRICT OF RAINY RIVER	\$61,458	91.5	o
PEEL.	\$40,000	240.8	11.7 183.1
NORTH BAY	\$53,949	•	11.7
MIDLAND	\$57,362 \$53,949	161.1	0
LONDON®	\$54,079	198.1	21.1
KITCHENER/ WATERLOO*	\$100,427	335.1	89.2
DURHAM	\$71,990	266.44	94.7
BRANTFORD	\$72,996	178.1	247.3
BELLE. VILLE	\$78,083	237.8	168.5
	ANNUAL EXPENDITURES	Average monthly staff hours	Average monthly volunteer hours

\* The expenditures figures for Kitchener/Waterloo and London represent all funds expended for Supervised Access. Not all of this money was received from the Attorney General. The expenditure figure for Peel represents only the money received from the Ministry of the Attorney General for the Supervised Access pilot project. The centre also receives funds through the Children's Aid Society solely for the supervision of CAS cases. These funds were not included in the figure shown in the chart.

\*\* Not calculated because of missing data.

### Decision-Making

Supervised Access centres generally appeared to make few fundamental decisions affecting the nature of the organization or its services. This occurred for a number of reasons. First, the goals/objectives and the general way in which services are to be delivered are defined for the program by the Ministry of the Attorney General, and cannot be altered; second, resources are more or less fixed; third, the programs are small; and finally, many Supervised Access programs are part of larger organizations and do not need to address many of the decisions that independent organizations face.

To gain insight into the content and process of decision-making, coordinators were initially asked to identify three important decisions that they had made. Each decision was then followed by a brief description of the process which led to the identification and solution of the related problem.

There was little overlap in the most important decisions identified by coordinators. They included such decisions as opening new sites, changing the hours of operation, installing a security system, organizing training, and criteria for accepting clients into the program.

The process involved in making a decision was similar across centres. Generally, the problem was identified at the operational level. For example, a parent might approach the centre, wanting to use the program but not able to visit during its current hours. Once the problem had been brought to the attention of the coordinator, the process of trying to solve the problem would begin with the coordinator taking the leading role. Often the coordinator would inform the person he or she reported to (typically some one else in the agency if the program was linked, or a Board member if independent), and may also have discussed the problem with staff. Once the coordinator formulated a solution (e.g., extend hours), he or she would bring the planned decision forward for approval. If the decision was important, the decision would go to the Board for approval.

### Communications

Organizational communications have an internal and an external aspect. Internal

communication activities appear to be fairly straight forward because Supervised Access centres tend to be small and have a flat organizational structure.

Communication with people outside of the centre, however, is a central function of centres, and it requires a great deal of the Coordinator's time. In order to obtain more information on this activity, we asked coordinators to identify which groups they spent the most time communicating with. The results, shown in Table 3.1.12, are consistent with Coordinator rankings of their most time-consuming activities and show that coordinators spent most of their time talking to parents, lawyers, and their staff/volunteers. With prospective parents, coordinators spent their time talking about the program and arranging the intake. With parents already in the program, time was spent resolving problems, responding to requests, and rescheduling visits. Coordinators talked to lawyers about such things as their clients, issues that fall outside of the agreement, and about court agreements. Coordinators met with staff and volunteers to discuss the program, to provide training, to talk about particular cases, and to address their concerns.

Communication efforts designed to increase community awareness of the Supervised Access program are also of interest. As shown in Table 3.1.13, Supervised Access programs used a variety of ways to inform the community about their services. The most frequently targeted group was lawyers. When asked specifically whether they had spoken to lawyers in the past six months, ten of the coordinators reported speaking to one or more lawyers (average 40). Almost all coordinators (13) felt that lawyers were well informed about Supervised Access. Similar results were found for judges. Eight coordinators had spoken to judges in the past six months, and 13 of the coordinators felt that judges were well informed about Supervised Access. These results were confirmed when we interviewed judges and lawyers (see section 3.6).

TABLE 3.1.12

Groups/Agencies that Coordinators Spend the Highest Percentage of Their Time
Communicating With

GROUP	%
Children	4
Paid Staff and Volunteers	18
Board/Supervisors/Advisory Committee	0
Parents	50
Lawyers	25
Judges	0
Community Service Agencies	0
Other	4
TOTAL	101

TABLE 3.1.13

Two Most Frequent Activities to Promote Supervised Access in Past Six Months

ACTIVITY	FREQUENCY
Sent out letters, Flyers	4
Talked or Met with Local Groups	5
Met with Lawyers	7
Met with Judges	1
Articles in Local Newspaper	4
Attended Local Events	0
Other	3
No Activities	4
TOTAL	28

In terms of inter-agency communication, it appears that almost all coordinators have referred clients to other agencies, although one coordinator stated that this was not a central component of the program. The most common type of referral is to a family counselling centre. Other organizations used for referral include the Children's Aid Society, Women's Shelters, health units, support groups, the Official Guardian's Office and services for those with psychiatric disabilities. Community agencies/groups reported that they first became aware of the Supervised Access centre from other agencies (8), colleagues (6), the media (3), or centre advertising (1).

### **Providing Inclusive Services**

Coordinators were asked about service provision to racial/ethnic minority groups and to persons with disabilities.

Supervised Access programs have served a variety of clients who are racial minorities and/or from different ethnic groups. Groups include: Asian, West Indian, Aboriginal and First Nations, East Indian, Portuguese, Guyanese, French Canadian, South American, Arab, Polish, Pakistani, Iranian, Iraqi, and Italian. The Toronto centre was provided with \$10,000 in additional funds for providing services to racial minorities and clients from different ethnic groups, services such as interpreters and translation of brochures.

Five coordinators reported that it was difficult to serve these groups. Similar estimates were obtained from interviews with advisory board members, umbrella organizations and community agencies. London and Kitchener-Waterloo reported that one difficulty was language. By not having staff who understood the language it was difficult to communicate with the client, and provide adequate supervision. This problem was resolved by trying to recruit volunteers from the same ethnic backgrounds as the clients, and by providing interpreters/translators when necessary.

A second problem stems from cultural differences. For example, the centre at Sault Ste. Marie reported having difficulty with a client who found it difficult to accept direction from female staff. This problem was resolved by scheduling a male volunteer during that client's visits.

Simcoe and another centre reported having difficulty ensuring that Aboriginal and First Nations clients were aware of Supervised Access services and could use the service if appropriate. The centre involved had tried to deal with this problem by meeting with the Elders and Council Chiefs and explaining to them the Supervised Access Program and the services offered by the Centre.

When asked which groups in their community they would like to serve better the two groups identified were clients whose second language is English and Aboriginal and First Nations clients.

Some potential clients experienced a general lack of program accessibility because of the following factors: large catchment area or population base causing transportation problems and waiting lists and limited hours and days of operation due to funding constraints. In addition, it was reported (and independently confirmed during interviews with judges) that some judges are of the view that Supervised Access should be a short-term arrangement and will order Supervised Access only in those situations. Accordingly, some clients may not be referred to Supervised Access.

Four representatives from community agencies felt that some victims of spousal abuse were not using the program because some non-custodial parents would not agree to supervised access unless it is court ordered, and some judges will not order it unless there have been convictions.

Three advisory board members and six umbrella organizations questioned the Attorney General provision that prevents the Children's Aid Societies from using Supervised Access centres. In many cases the Children's Aid Society was willing to pay a fee for the service.

One person felt that gay and lesbian parents may need the service but were not using it.

Ten coordinators reported that they had served persons with disabilities. The disabilities of their clients (both parents and children) included children who are

labelled developmentally disabled; physical impairments such as hearing, sight, and mobility difficulty; and medical conditions such as epilepsy, diabetes, and spina bifida.

Coordinators reported taking the following steps to help their clients with disabilities. Facilities were wheel chair accessible, centres worked with available support services to aid these individuals, programs tried to provide a service attuned to the needs of these clients (e.g., ensuring that a staff person who can "sign" is available, gradually familiarizing a child labelled as seriously developmentally disabled with staff and the centre's environment), and centres ensured that additional staff were present.

### **Coordinator Suggestions**

Finally, coordinators offered a variety of suggestions to organizations planning to offer supervised access. The suggestions fell into the following categories:

- Community Involvement. Centres should have the support of their community. In particular, it is important to get connected with the legal community, especially family lawyers, judges, and the court services managers.
- Services Offered. Strive to provide a safe, neutral service. Try to provide service off-site for some clients. Ensure that you have a good volunteer base.
- Funding. Because of the uncertainty of public funding, try to obtain private funding.
- Find a good facility.

# 3.2 Monthly Statistical Reports

### Number of Critical Incidents

Between July 1992 and December 1993, 26 critical incidents were reported. From

descriptions of 22 of the incidents, indications of child abuse (6) and parental confrontation (6) accounted for over half of the reports. Indications of child abuse included both physical and sexual abuse and four of the six incidents were alleged to have occurred on site. Four of the six parental confrontations reported, included actual or threatened violence.

In three instances, an incident report was triggered by the late return of the child(ren) by the non-custodial parent after an exchange. In each case, staff had been unable to contact the parent and no attempt had been made by the parent to contact the centre. Related to the issue of lateness, three non-custodial parents became abusive to centre staff when, upon arriving late for a visit, they found that their children had left or were about to leave.<sup>18</sup>

Finally, four reports were filed for individual incidents involving: sudden ill-health of a visiting parent; a minor accident involving a child; the transportation of a child by a parent without vehicle insurance, and an apparent stalking of the centre by an unknown person. Relative to the number of visits, critical incidents occurred infrequently. In 1992 there was one critical incident, and in 1993, the period for which there is a good record of the number of visits, there were 21 critical incidents during a total of 14,812 visits; that is 1.4 critical incidents occurred during every 1000 visits. Thus, as measured by the number of critical incidents, centres provide a relatively safe environment for children, custodial parents, and non-custodial parents.

### Use of Service

The extent to which a program is used can be measured in terms of the number of families being served and the number of visits or exchanges which occur<sup>19</sup>. Table

<sup>&</sup>lt;sup>18</sup>All of these incidents occurred in Toronto and involved male non-custodial parents. In one incident, the visit eventually went ahead (the children were still at the centre) after the parent calmed down. In a second incident, the non-custodial parent left after yelling at staff in a parking lot. In the final incident, the parent left after being advised that the police would be called.

<sup>&</sup>lt;sup>19</sup>During a "visit," the non-custodial parent spends time with a child or children under the supervision of staff. In an "exchange" the custodial parent drops off his/her child(ren) at the centre where they are picked up and taken away by the non-custodial parent. The

3.2.1 presents for each agency the average number of visits and exchanges per month across three time periods during 1993. The three time periods are January to April, May to August, and September to December. It was decided to take the average number of visits and exchanges since not all programs reported for each month.

Examining first the number of visits and exchanges, it is clear that there is tremendous variation across programs in use of the service. Across programs the average number of visits ranged from fewer than 20 to over 300 per month and exchanges from 0 to over 100. In terms of the average number of visits, the two largest centres by far were Toronto and Peel.

The number of visits and exchanges per month has grown since the beginning of the evaluation. This result was anticipated because most of the centres started to operate only a short time prior to the evaluation. The growth in the number of visits occurred mostly in 1992, and as shown in Table 3.2.1, the number of visits increased only slightly by 7% in 1993. In contrast, the number of exchanges has continued to grow in 1993, and was about 50% larger at the end of the year than at the beginning.

parents do not actually meet; visiting occurs off-site and is not supervised.

Table 3.1.1

Average Number of Visits and Exchanges Held in Each Program

-	T	,		1	7-0-			-
TOTAL	983.95	1136.15	1055.58	1058.6	304.95	333.65	467.0	386.5
CORNWALL	46.0	39.5	48.33	9.47	7.0	19.75	9.3	12.0
TORONTO	236.75	344.3	303.5	294.9	31.0	46.7	76.0	51.2
YORK REGION	46.75	55.5	8.5	56.3	0	0	4.5	1.5
MINDSOR	44.7	58.7	56.75	53.4	13.7	19.0	24.75	19.2
SAULT STE. MARTE	21.75	23.5	27.5	24.3	3.0	10.5	13.5	0.6
RIVER	16.25	8.7	15.5	13.5	17.75	36.3	34.5	29.5
PEEL	204.5	209.7	215.75	210.0	32.5	32.3	37.5	34.1
NORTH BAY	33.75	31.7	N/R <sup>22</sup>	32.8	10.75	26.3	N/R	18.5
MIDLAND	29.5	32.3	38.0	33.3	0	0	5.7	1.9
WERRY -	83.7	65.0%	52.0	6.99	118.0	N/R	122.0	120.0
Kitchener /Waterloo	80.5	78.5	86.5	81.8	29.5	24.5	28.5	27.5
DURHAM	42.0	60.5	69.021	57.2	7.25	5.0	25.0	12.4
BRANTFORD	65.75	101.0	59.25	75.3	16.25	26.5	49.75	30.8
BELLE- VILLE	32.0	27.25	17.0	25.4	18.25	53.5	36.0	35.9
WEASURE	Average number of visits per month in ist period (Jan-Apr 93)	Average number of visits per month in 2nd perlod (May-Aug 93)	Average number of visit per month in 3rd period (Sep.Dec 93)	Average number of visits per month (Jan.Dec 93)	Average number of exchanges per month in first period	Average number of exchanges per month in second period	Average number of exchanges per month in third period	Average number of exchanges per month (Jan.Dec 93)

<sup>20</sup> From Coordinator's estimates. Data not submitted for whole period

<sup>21 1</sup> observation only.

<sup>22</sup> Not reported.

Table 3.2.2

Movement of Families In and Out of Supervised Access (SA) For Each Agency

	7			
AGENCY	AVERAGE # FAMILIES IN PROGRAM EACH MONTH	AVERAGE # FAMILIES ENTERING PROGRAM PER MONTH	AVERAGE # FAMILIES LEAVING PROGRAM PER MONTH	ESTIMATED AVERAGE DURATION IN PROGRAM (MONTHS)
Belleville	20.60	3.40	2.50	6.51
Brantford	25.42	5.83	4.42	5.68
Cornwall	19.91	5.73	1.73	5.89
Durham	27.00	4.00	.89	8.65
Kitchener/Waterloo	36.82	4.32	3.86	8.57
London	55.00	4.43	3.00	17.59
Midland	9.27	2.00	1.27	5.83
North Bay	17.00	3.50	1.83	6.06
Peel	85.90	10.50	9.40	10.24
District of Rainy River	8.75	1.25	0.58	6.33
Sault Ste. Marie	12.17	1.42	1.17	8.03
Toronto	69.11	10.33	5.11	7.55
Windsor	38.18	5.27	2.91	7.78
York Region	18.42	2.33	2.25	5.85
OVERALL AVERAGE	30.23	4.43	2.92	7.76

Table 3.2.2 shows the average number of families per month being served by each program from January to December 1993, the average number entering and leaving the program and the average length of time a family stayed in the program. Looking first at the number of families served, it can be seen that Peel, Kitchener/Waterloo, London, and the Toronto program served substantially more families in 1993 than the other programs. The size of the programs may in part be attributable to the size of the population (shown in Table 3.0.1) it serves. For example, the District of Rainy River, with a small population dispersed over a large catchment area, had the smallest program. The number of visits and exchanges that occur each month may also depend on such factors as the racial/ethnic makeup of the community that is served, judgements handed down by the courts regarding the frequency and length of access, size and configuration of program facilities, the number and availability of staff and volunteers, the hours of operation, the philosophy of the programs regarding the appropriate number of families who can visit at one time, and whether the centre is well established.<sup>23</sup>

To investigate in a preliminary way which factors influence the number of visits, regression analyses were carried out. Although small numbers prevent us from drawing strong conclusions (there are only 14 programs), the analysis suggests that there probably is an effect of community size on the use of the program, though it is not statistically significant. To investigate this matter further, we calculated the rate of use of the program, shown in Table 3.2.2a. Rate refers to the number of people per 1000 people in the community who use Supervised Access. Under the hypothesis that use of the service is determined solely by population size, there should be no differences between these values. This expectation is clearly inconsistent with these findings, which vary dramatically from centre to centre. Community size alone, therefore, does not account for variation in program use.

<sup>&</sup>lt;sup>23</sup>These factors, identified through interviews with coordinators, are plausible. It was not possible to establish whether these actors actually affected the number of visits and exchanges because there are only 14 centres.

Table 3.2.2a

# Rate of Use of Supervised Access Programs

														חמות סמו נווסססנויי
0.0	0.02	0.04	0.14	0.09	0.4	0.12	0.3	0.03	0.14	0.10	0.07	0.22	0.2	Data per thousand
0 4	3	)												
				MARIE	RIVER		BAY			/WATERLOO	9	DISSIST CHO	VILLE.	•
		REGION		STE	OF BAINY	PEEL	HIHON	MIDLAND	LONDON	KITCHENER	DIRHAM	BOANTEORD	2	
CORNWALL	TORONTO	YORK	WINDSOR	CALL T	010101	1								
														,

In addition to exploring the issue of program size, we investigated whether centres were at capacity by asking coordinators how many supervised access visits occurred at their centre per month, and then how many visits their centre could provide within its current budget. Results indicated that most programs could grow, although by only about 20%. On average, across all programs, coordinators reported that they could provide about 16 more visits per month. Three centres were at capacity and coordinators reported that their centre had waiting lists.

## **Dynamics of Supervised Access**

As Table 3.2.2 shows, there is considerable movement of families in and out of Supervised Access at all agencies. Averaged across agencies about 30.23 families were in a given Supervised Access centre in a month. Each month 2.92 families left the program, while 4.43 families joined the program.

Using an adaptation of a modelling technique described in Gunderson & Riddell (1993, chapter 24) it was possible to estimate the average duration of time that a family remained in Supervised Access. Overall, participants spent an average of 7.76 months at a Supervised Access centre, confirming the reports of coordinators, advisory boards and umbrella organizations that Supervised Access is a short-term<sup>24</sup> program for most clients. Several factors affect the duration of Supervised Access arrangements, according to coordinators. Arrangements tend to be of short duration when children are being re-introduced after an absence, and when there is conflict between the parents. According to some coordinators and judges the arrangement is of long duration if there are psychiatric disabilities that cannot be managed, alleged or proven sexual physical or emotional abuse, drug/alcohol abuse, or fear of abduction.

Inspection of the estimated durations in Table 3.2.2 shows that programs operating prior to the establishment of the Supervised Access Pilot Project--Kitchener/Waterloo, London, and Peel--tend to have longer average durations of stay for families than the newer programs. The following is one explanation for this result. Although most clients are in Supervised Access programs for a short time, a few clients, for example those with chroric unmanageable psychiatric disabilities may be in the program for a

<sup>&</sup>lt;sup>24</sup>The term 'short term' was used to describe an involvement in Supervised Access of 6 to 12 months in duration.

long time. As programs are in operation for longer periods of time, the composition of their clients changes, and increasingly consists of long duration clients.

If the composition of clients at centres increasingly consists of long-duration clients then there should be a small, but steady increase in the average duration of clients as programs are in operation for longer periods of time. We investigated this possibility by examining the estimated average duration of stay by families in the program for each month of 1993 for long established and new programs. The independent variables were Length of Operation (the three programs in operation longest versus new programs), and Month (the month in 1993 in which the estimated duration was obtained). Regression analysis was conducted on 24 data points (average duration for each of 12 months, for long duration and new programs). Results, shown in Table 3.2.2b, provide some support for the hypothesis that over time long-duration clients gradually comprise a larger percentage of the clients in Supervised Access programs. There was a significant effect of Length of Operation, and a positive though statistically non-significant effect of Month. The failure to find a significant effect of Month may be attributable to the small number of observations, and the expectation that the effect size of Month should be small relative to the Length of Operation variable.

Table 3.2.2b

Regression Analysis of Average Duration in Program by Program Type and Month of 1993

EFFECT SIZ	ZE		
$\mathbb{R}^2$	.57		
Adjusted R <sup>2</sup>	.30		
ANALYSIS	OF VA	RIANCE	
	DF	SUM OF SQUARES	MEAN SQUARE
Regression	2	88.55	44.27
Residual	21	159.9	7.62
VARIABLE	IN TH	E EQUATION	Ī
Variable	В	Т	SIG. T
Long	3.74	3.32	.003
Month	.13	.77	.450
(Constant)	6.01	4.53	.000

In summary, based on these results, we believe that Supervised Access programs over time tend to become increasingly populated with long-duration clients, reducing their ability to serve clients needing Supervised Access services for a short-period of time. One factor that may counteract this tendency is the view of some judges that Supervised Access should be a short-term arrangement only<sup>25</sup>. For this reason some judges may be inclined to order a change in the access arrangement if a family remains in Supervised Access for a long time, or may restrict the time that the family will use the service in the original court order.

<sup>&</sup>lt;sup>25</sup> Section 3.6 discusses the perspective of judges in more detail.

# 3.3 Perspective of Custodial and Non-Custodial Parents

This section of the report presents results from the phone survey of custodial and non-custodial parents using the Supervised Access program. It begins with a descriptive account of the findings. We analyzed results separately for custodial and non-custodial parents because these two groups differ in important ways. For ease of presentation, however, we report results separately for custodial and non-custodial parents only if the findings differ for these two groups.

# Description of Parents and Their Previous Access Arrangements

Our sample consisted of 54 non-custodial and 67 custodial parents. Most of the non-custodial parents were fathers (44), though a few were mothers (9), and one had some other relationship to the children. As one would expect, most custodial parents were mothers (57), though a few were fathers (7). A few (3) were not parents and had some other relationship to the children.

Parents using Supervised Access who were interviewed had on average about 12 years of education, though this varied from 7 to 17 years of schooling. As a group, the parents interviewed using Supervised Access were much less likely to have a job than the general population. Only about 43% of the parents had jobs at the time of the survey.<sup>26</sup> There was a large difference between the two groups of parents. Noncustodial parents were significantly more likely to have a job than custodial parents (56% versus 33%;  $\chi^2(1) = 6.30$ , p<.01). Non-custodial parents were also more likely to have remarried or be living in a common-law relationship than custodial parents (39% versus 22%).

Parents had been separated from their ex-partner for an average of 2.5 years, though this varied from .5 year to 7 years.

Many of those surveyed (61%, n=74), reported that they had used other types of access arrangements prior to their contact with the Supervised Access centre. Of

<sup>&</sup>lt;sup>26</sup>The appropriate comparison is to the employment rate defined as the ratio of employed workers to the population of working agehas usually been greater than 60% in Canada since the 1980s (Gunderson & Riddell, 1993).

those who used prior types of access arrangements, 54% reported using unsupervised access, 27% used access supervised by a friend or relative, 3% access supervised by an agency, and 16% some other type of arrangement.

The arrangements used prior to Supervised Access lasted for about a year. As shown in Table 3.3.1, the arrangements were stopped for a variety of reasons. Some of the more common reasons given were: access denied by custodial parent (n=12) (reported most often by the non-custodial parent); fear for safety of the child (n=11) and self (n=5) (both reported mostly by custodial parent); conflict between parents (n=10); and other parent unreliable (n=8).

Table 3.3.1

Reasons for Stopping Previous Access Arrangement

Reason	Non-Custodial	Custodial	Total
Sponsor unable to continue	2	2	4
Supervisor biased	0	0	0
Supervisor unreliable	0	1	1
Fear for safety of self	0	5	5
Fear for safety of child	1	10	11.
Other parent unreliable	1	7	8
Access denied by court	0	4	4
Access denied by custodial parent	10	2	12
Conflict between parents	. 5	5	10
One of the parents moved	1	2	3
Other	11	23	34

## Reason for Using Supervised Access

Parents interviewed reported using the Supervised Access program for a variety of reasons. As shown in Table 3.3.2, there appear to be a large number of reasons for using Supervised Access, which differ between custodial and non-custodial parents. This latter result is not surprising, given that parents using the Supervised Access program are often before the court because of allegations (often disputed) about whether or not there was abuse of the child. It may also be that some parents are denying the existence of wife assault or some other problem affecting custody and access to the child(ren). The most common reasons given for using Supervised Access included: concerns about abuse of the child, wife assault, concerns about parenting ability, and unresolved conflict between parents. In addition, non-custodial parents frequently answered this question by saying that it was at the request of the custodial parent or that it was best for the child.

Table 3.3.2

Main Reason for Using Supervised Access

	% NON-	%
REASON	CUSTODIAL	CUSTODIAL
Wife assault	4 .	7
Concerns regarding abuse of child	17	43
Concerns regarding parenting ability	7	7
Re-introduction of Non- custodial parent	13	0
History of psychiatric disability	2	0
History of alcohol/drug abuse	2	5
Concerns regarding abduction	0	5
Unresolved conflict between parents	13	12
Request of custodial parent	13	1
Best for child	13	3
Other	16*	17*
Total	100	100

A careful examination of the 'other' category suggested that several responses of custodial and non-custodial parents could probably be put into several of the existing categories. However, it required too much judgement on the part of the researcher. Consequently, we have not done this.

# Finding Out About Supervised Access and Getting Referred to It

Parents became aware of Supervised Access in a number of different ways. The most common way was through their own lawyer (38%), although their spouse's lawyer, other social service agencies, and word of mouth were also important ways of finding out about supervised access.

Table 3.3.3, which shows the different sources of referral to Supervised Access, demonstrates the importance of the legal system in the referral process. Judges, lawyers, and the Official Guardian's office account for about 70% of all referrals. This finding is consistent with the statistical data from the programs, shown in Table 3.3.4, which reveal that the legal system is the central source of referral (80%).

Table 3.3.3
Sources of Referral to Supervised Access

SOURCE OF REFERRAL	% PARENT
Judge	23
Own lawyer	36
Other parent's lawyer	7
Official guardian	3
Self	10
Other parent	3
Other (e.g., court recommended)	19
TOTAL	101
N = 120	

Source of Referrals to Supervised Access (From Statistical Reports)

Table 3.3.4

SOURCE				NUMI	NUMBER OF REFERRALS PER MONTH	REFE	RALS	PER M	ONTH				
	JAN	FEB	MAR	APR	MAY	JUN	JLY	AUG	SEP	OCT	NOV	DEC	TOTAL
Court Ordered	97	128	206	193	235	226	210	219	181	212	124	185	2,216 (56.7%)
Court Recothmended	9	3	3	2	5	5.	9	4	3	4	6	8	58 (1.5%)
Custodial parent's lawyer	12	21	19	12	27	36	32	29	36	29	43	39	335 (8.6%)
Nón-custodial parent's lawyer	٧.	16	30	25	33	37	31	37	41	34	49	46	384 (9.8%)
Officlal guardian	8	0	7	∞	7	9	7	7	9	6	11	11	85 (2.2%)
Custodial parent	12	14	25	25	25	29	30	26	28	14	31	32	291 (7.4%)
Non-custodial parent	2	4	15	21	18	26	33	33	34	29	29	33	277 (7.1%)
Other	6	18	26	23	22	19	22	19	25	12	16	51	262 (6.7%)
TOTAL	146	204	331	309	372	387	371	374	354	343	312	405	3908

Taken together, the findings show that the legal system plays a primary role in making parents aware of Supervised Access. This result strongly suggests that the most effective way to promote awareness and use of Supervised Access is through the legal system. Community-based agencies also play a role but are less often cited as sources of referral, and only occasionally appear to have informed parents about the availability of Supervised Access.

### Preferred Access Arrangements

Custodial and non-custodial parents disagreed about the types of access arrangements they most preferred. As shown in Table 3.3.5a, custodial parents equally preferred arrangements that minimized their contact with the non-custodial parent (no access) or imposed the most structure upon visits between the child and non-custodial parent (supervised access). In contrast, non-custodial parents overwhelmingly preferred arrangements that were the least restrictive (unsupervised access). When parents' first and second choices were collapsed into one category (see Table 3.2.5b) what emerges clearly is that custodial and non-custodial parents have very different views of their least preferred arrangement; while the former clearly wished to avoid unsupervised access, the latter definitely wished to avoid a no-access arrangement. This table also reveals that, in terms of types of supervised access arrangement, custodial and noncustodial parents expressed differing preferences. While almost 50% of custodial parents selected access supervised by an agency as their first choice (over all other options), only 19% of non-custodial parents chose agency-supervised access as either their first or second choice. In contrast, while 33% of non-custodial parents selected access supervised by a friend or relative as either their first or second preference, only 17% of custodial parents did so, perhaps because non-custodial parents have less control and are more restricted in agency-supervised access. It is tempting to speculate from the latter findings that, in addition to a loss of control in agencysupervised access, non-custodial parents perceive agency-supervised access as more aligned with the agenda of custodial parents than with their own concerns and goals, and thus give it a low ranking in terms of their preferred access arrangements. Although we do not know what accounts for the differing preferences of custodial and non-custodial parents, this interpretation is also consistent with the discussion of the satisfaction data, reported below.

Table 3.3.5a

Most Preferred Access Arrangement of Parents

ACCESS	% NON-	%	
ARRANGEMENT	CUSTODIAL	CUSTODIAL	
No access	4	48	
Access supervised by Agency	7	- 46	
Access supervised by friend/relative	7	3	
Unsupervised access	82	3	
TOTAL	100	100	
N	54	67	

Table 3.3.5b

Most and Second Most Preferred Access Arrangements of Parents

Access Arrangement	Non-Custodial %	Custodial %	
No access	2	33	
Access supervised by Agency	19	47	
Access supervised by friend/relative	33	17	
Unsupervised access	47	4	
TOTAL	99	101	
N	107	133	

### Overall Satisfaction with Supervised Access

In assessing the Supervised Access program it is important to determine the satisfaction of custodial and non-custodial parents. At the outset it should be noted that it may be very difficult even for well-run Supervised Access centres to provide a service that satisfies both sets of parents. These programs are providing a service to three separate parties (children, custodial parents, and non-custodial parents) each with different needs and preferences. In addition, custodial and non-custodial parents often have been in conflict with each other directly and indirectly (through the court system) and may be quite angry as a result. In short, it may be difficult to interpret the rated satisfaction of parents. To assist in our interpretation, parents were asked to rate their satisfaction with "the idea of supervised access" as well as related services. That is, how satisfied are you with "the legal system with regard to custody and access matters"; and "the way in which your lawyer has represented your interests." This allowed us to place satisfaction with Supervised Access centres in a broader context so that it could be assessed in relative, as well as absolute, terms.

The results in Table 3.3.6 show that over 90% of custodial parents and 70% of non-custodial parents were satisfied or very satisfied with Supervised Access. In contrast, only 29% of custodial parents and 11% of non-custodial parents reported being satisfied with the legal system, (and 33% of custodial parents and 63% of non-custodial parents were very dissatisfied with the legal system). Satisfaction with their lawyer fell between these two extremes, though the pattern of responses resembled more closely the ratings of Supervised Access than the legal system.

Table 3.3.6

Satisfaction of Parents with Supervised Access, Legal System, and Own Lawyer

DEGREE OF SATISFACTION	SATISFACTION WITH SUPERVISED ACCESS	ION WITH D ACCESS	SATISFACTION WITH LEGAL SYSTEM	WITH LEGAL	SATISFACTION WITH OWN	WITH OWN
	Non-Custodial %	Custodial %	Non-Custodial %	Custodial %	Non-Custodial	Custodial %
Very satisfied	44	72	4	16	39	45
Somewhat satisfied	26	19	7	13	22	33
Neutral	11	4	7	13	7	9
Somewhat dissatisfied	11	3	17	24	9	7
Very dissatisfied	7	1	63	33	22	7
No response	0	0	2	0	4	2
Total	66 .	66	100	66	100	100
Z	54	29	54	19	54	19

In summary, these findings show that, in spite of having to deal with two parties who are often in conflict with each other and who may want very different access arrangements for their children, the Supervised Access program provided a service that satisfied both custodial and non-custodial parents. In contrast, there appears to be substantial dissatisfaction on the part of parents about the way the legal system operates in matters of custody and access. The high level of satisfaction with the Supervised Access program reported by non-custodial parents is particularly striking in light of the fact that, in the abstract, this form of access arrangement is neither party's most preferred arrangement (see Preferred Access Arrangements).

Aside from the generally high levels of satisfaction with the Supervised Access-program, an interesting finding that emerges from these data is that custodial parents reported higher levels of satisfaction with Supervised Access than did non-custodial parents (e.g., 72% vs. 44%, respectively, reported being "very satisfied"). This finding is consistent with parents' relative satisfaction with the legal system and with their own lawyer. As Table 3.3.6 shows, almost two-thirds of non-custodial parents reported being very dissatisfied with the legal system, double the figure for custodial parents. Similarly, 22% of non-custodial parents reported being very dissatisfied with their lawyer, while only 7% of custodial parents did so.

There are two broad interpretations of this pattern of results. One is that custodial parents are able to adapt more effectively to the terms of custody orders than non-custodial parents. Alternatively, the "whole system", including the courts, lawyers, and Supervised Access centres may be more synchronous with custodial parents' perspective than with that of non-custodial parents. However, this may well be due to the nature of custody disputes and the fact that many non-custodial parents may feel that they are "losers" who may therefore feel more negatively toward the system that put them in that position. For example, non-custodial parents may not like the terms of their support order, and the fairly restricted conditions under which they can visit their children. This suggestion is interesting in that it provides an explanation for non-custodial parents' relative satisfaction with Supervised Access centres when compared to their feelings about the legal system and their lawyer. That is, non-custodial parents are not as likely to view the Supervised Access program as

responsible for the "loss" of their children as the legal system or their own lawyer, and in fact see the centre as a means of maintaining a relationship with them. This explanation is also consistent with the difference between non-custodial parents' views of supervised access in general (which in terms of the range of possible options is disliked) and the Supervised Access program specifically (which is seen as mitigating the negative consequences of their legal position with respect to custody).

# Satisfaction with Features of Current Supervised Access Service

For a more detailed understanding of parental satisfaction, custodial and non-custodial parents were asked to rate their satisfaction with different aspects of the Supervised Access centres. As one would expect given the results just reported, almost all aspects of Supervised Access were highly rated. As shown in Table 3.3.7, over 80% of parents were satisfied with the facilities, staff neutrality, safety for child, safety for parent, and staff.

Table 3.3.7

Satisfaction of Parents with Different Aspects of Supervised Access Programs

ASPECT OF PROGRAM	% SATISFIED	% NEUTRAL	% DIS- SATISFIED	TOTAL	N
Hours of service	74	8	18	100	121
Facilities	86	4	10	100	121
Staff neutrality	81	8	11	100	121
Safety for child	93	5	2	100	120
Safety for parent	90	2	8	100	121
Restriction of visits to site *	70	4	25	99	121
Group visits	76	10	14	100	120
Reports on visits	48	25	26	99	118
Location	75	7	18	100	121
Staff	88	4	8	100	121
Rules	78	7	15	100	121

<sup>\*</sup> Custodial and Non-Custodial parents expressed very different points of view. Although 91% of Custodial were satisfied with this feature of Supervised Access, only 44% of Non-Custodial rated this as satisfactory.

One area that seemed to give parents difficulty was the reports on visits, and this did not vary by type of parent. Only 48% of parents were satisfied, 25% were neutral, and 26% were dissatisfied with this feature of supervised access. One aspect of Supervised Access centres that non-custodial parents did not like but with which custodial parents were happy, was the restriction of visits to the site. This result is not surprising, given that most non-custodial parents want to visit their children in as "normal" a setting as possible, and dislike having restrictions on where they can take their children and what they can do with them, whereas custodial parents want to restrict the location of visits, and the activities of the non-custodial parent to ensure the safety of their children.

## Expectations

Custodial and non-custodial parents were asked to report which services they expected from the Supervised Access program prior to the start of visits. Findings shown in Table 3.3.8 indicate that custodial and non-custodial parents appeared to find different aspects of Supervised Access salient<sup>27</sup>. Interpreted in this way, visits were much more salient for non-custodial parents (70%) than for custodial parents (46%), whereas safety of the environment and supervision of visits were more salient for custodial parents than non-custodial parents.

Few parents reported that they expected that there would be counselling or mediation, services not provided by the Supervised Access centres. On the other hand they also failed to mention the presence of exchanges and reports, two services of Supervised Access. Taken together, these findings suggest parents may have a partial but incomplete understanding of Supervised Access prior to the start of visits. This notion is supported by the finding that 43% of the non-custodial parents, and 27% of custodial parents reported that their expectations of Supervised Access had changed since they began participating in the program.

<sup>&</sup>lt;sup>27</sup>We interpret these results in terms of "salience" because parents were asked to recall without prompting which services they expected.

Table 3.3.8

Expected Services to be Provided by Supervised Access Before Using Service

	% NON-	%
EXPECTED SERVICES	CUSTODIAL	CUSTODIAL
A place to visit	70	46
Exchanges	4	2
Safe environment	7	55
Supervisor	17	58
Reports for Court/Lawyer	2	5
Counselling	4	3
Mediation	2	2

#### Factors Related to Overall Satisfaction

The question that we are examining here is which characteristics of individuals (personal variables) and organizations predict satisfaction of parents with the service. We need to know first what kinds of personal variables affect satisfaction. After we have taken account of the factors within individuals which affect satisfaction we are interested in whether any organizational variables were related to satisfaction.

This approach was taken because Supervised Access Centres may differ in terms of the type of parents served. For example, earlier in this report, we presented findings that some centres are more likely to serve families for a longer period of time than other centres. Thus, differences observed between centres could either be the result of differences in the clients served, or could reflect differences in the set up of organizations. To deal with this possibility we have adopted the strategy of first determining which individual characteristics affect satisfaction. Then we examined the role of organizational factors, after individual factors have been taken into account.

<u>Personal Variables</u>. We hypothesized that the following personal variables would be related to satisfaction: reasons for referral to the centres, initial expectations of the centre services, marital status, and employment. (Appendix B presents the structure of the variables.) We began by examining the correlation between the personal variables and the overall satisfaction for the custodial and non-custodial parents separately since the results obtained so far suggest that these two groups have different objectives for enroling in Supervised Access, and their level of satisfaction is different. This may mean that factors related to their satisfaction also differ. Results can be seen in Table 3.3.9. Custodial parents are more satisfied when the program is meeting their current expectations and when their education levels are higher. None of the personal factors were significantly related to non-custodial parents' satisfaction, but there was a tendency for non-custodial parents in jobs to be more satisfied with the Supervised Access program than non-employed non-custodial parents. In order to examine the unique contributions made by the predictor variables to custodial parents' satisfaction, the personal variables were entered into a stepwise regression.

The findings reveal that the two factors which were significant in the simple correlations (whether the program met their expectations and their overall level of education) each accounted for unique variance in the overall regression and no other variables were significantly related to satisfaction. That is, custodial parents with higher levels of education, and those who felt that the program had met their expectations, had higher levels of overall satisfaction. These two factors taken together are strongly predictive of overall satisfaction; the adjusted R<sup>2</sup> indicates that this accounts for 28% of the variance. (See Table 3.3.10)

No regression was carried out for non-custodial parent satisfaction with the program as none of the personal variables were significantly related to satisfaction.

Correlation Coefficients between Overall Satisfaction and Personal Characteristics for Custodial and Non-Custodial Parents

Table 3.3.9

	ZERO-	-ORDER
FACTOR	Non-Custodial	Custodial
Marital Status	20	.01,
Meet Current Expectations	.12	.44**
No Access	.17	08
Supervised Access	.08	.05
Unsupervised Access	15	.09
Length Separated (weeks)	11	.08
Education	15	.25*
Employed/Unemployed .	.27	.06
Abuse/Abduction	.15	.11
Convenience/Best for Child	10	.09
Best for Child/Away too long	.09	.09
Court Request	.08	08
Away from child too long	.20	
Psychiatric Disability/Alcohol/Drug Abuse	06	.03
Wife Assault/Unresolved Conflict <sup>28</sup>	24	11
* p<.05 ** p<.01		

These and other categories shown in this table had to be collapsed in order to carry out the analysis. This in no way is intended to imply that the categories that were collapsed should be thought of as equivalent.

Stepwise Regression of Personal Characteristics Predictive of Overall Satisfaction
Custodial Parents

Table 3.3.10

EFFECT SIZE			
R <sup>2</sup>		.30	
Adjusted R <sup>2</sup>		.28	
ANALYSIS OF VARIANCE	DF	SUM OF SQUARES	MEAN SQUARE
Regression	2	13.66	6.83
Residual	59	31.78	.54
F(2,59) = 12.67	p< .000	-	

VARIABLES IN TH	E EQUATION		
VARIABLE	В	Т	SIG.T
Meet Current Expectations	.849	4.26	.001
Education	.101	2.62	.012
Constant	2.712	5.39	.000

## Non-Custodial Parents

No variables were entered into the equation.

Parental Satisfaction with Specific Aspects of Supervised Access. Next we examined which specific aspects of the Supervised Access program were most strongly related to overall satisfaction. We examined the extent to which satisfaction with service hours, facilities, neutrality, safety of the children or adult on site, group setting, writing of reports, location of centre, staff, and centre rules were related to overall satisfaction.

Table 3.3.11 presents the correlation coefficients between overall satisfaction and satisfaction with specific aspects of Supervised Access. Inspection of that table shows, as one would expect, that 19 of the 22 correlations (zero order) between the components and overall satisfaction are positive. For custodial parents, overall satisfaction is most strongly related to satisfaction with the quality of the facility, neutrality, presence of a group setting, with staff and centre rules. These correlations are all significant at or above the 5% level of significance.

Table 3.3.11

Correlation Coefficients between Overall Satisfaction and Satisfaction with Components of Supervised Access for Custodial and Non-Custodial Parents

		<del></del>
	ZERO	-ORDER
FACTOR	Non-Custodial	Custodial
Service Hours	.14	.04
Facilities	.25	.33**
Neutrality	.21	.46**
Safety of Child	.02	.21
Safety of Adult	.09	16
On Site Visit	.03	.12
Group Setting	.08	.35**
Reports on Visits	03	.15
Location	.01	.17
Staff	02	.43**
Centre Rules	.26	.28*
Staff:Volunteer Ratio	07	.10
Coordinator Time with Clients	15	04
<ul> <li>p&lt;.05</li> <li>p&lt;.01</li> <li>Controls for Meet Current Expectations and Education</li> </ul>		

We investigated the effects of these factors on overall satisfaction for custodial parents using a stepwise regression approach. To examine whether satisfaction with these specific aspects exerted an impact on overall satisfaction once the effects of personal variables had been accounted for, we performed a stepwise regression with the specific aspects of satisfaction entered as explanatory variables. However, these variables were entered into the equation after forcing in the personal variables previously found to be significant. Results, shown in Table 3.3.12, reveal that one additional variable, satisfaction with facilities or equipment was entered into the equation. However, the addition of this component of satisfaction into the regression equation does not significantly increase the amount of variance accounted for. Thus, there is no compelling empirical reason for favouring this more complex regression model over a simpler model that consists of parental characteristics. No regression was run for the non-custodial parents as none of the simple correlations between satisfaction with specific aspects of Supervised Access and overall satisfaction were significant.

Table 3.3.12

# Stepwise Regression between Specific Aspects of Satisfaction and Overall Satisfaction controlling for Personal Characteristics

## Custodial Parents

Effect Size	
R <sup>2</sup>	.26
Adjusted R <sup>2</sup>	.22

Analysis of Varian	ce		
	DF	Sum of Squares	Mean Square
Regression	3	8.37	2.79
Residual	57	23.70	.42
F(3,57) = 6.71	p< .001		

VARIABLES IN THE EQUATION			
VARIABLE	В	Т	Sig.T
Meet Current Expectations	.35	1.80	.078
Education	.07	1.89	.063
Facilities	.25	2.72	.009

## Non-Custodial Parents

No variables were entered into the equation.

Organizational Variables. Finally we examined the relationship between the following organizational variables and overall satisfaction with Supervised Access (see Table 3.3.13): The number of visits provided per month, the coordinators' view of who the service benefits most (child benefits most vs. other responses), coordinators' education level and amount of experience, whether the centre had experience with providing supervised access services prior to the pilot project, the organizational structure of the centre (i.e., whether the centre is a stand-alone facility or linked with a larger organization), whether the centre specifically mentioned neutrality<sup>29</sup> as a goal in its policy documents, availability of parking lots, room type (a large multi-family room vs. small individual rooms), presence of a waiting room, community size, staff: volunteer ratio, and amount of Coordinator time spent with clients. These variables were chosen for the regressions because discussions with key informants suggested that these factors may affect satisfaction of parents using Supervised Access.

<sup>&</sup>lt;sup>29</sup>Although neutrality is a Ministry requirement, we hypothesized that those Centres which specifically identified "neutrality" in their policy documents may have taken more steps to try to ensure the perception of neutrality.

Correlation Coefficients between Overall Satisfaction and Organizational Variables for Custodial and Non-Custodial Parents

Table 3.3.13

	ZERO-ORDER	
FACTOR	Non-Custodial	Custodial
# Visits per month	12	14
Child benefits most	.18	.00
Coordinator education	15	12
Coordinator experience	.04	12
History of involvement with Supervised Access	26	27*
Organizational structure	08	.06
Neutrality	02	30**
Parking	13	.03
Room type	09	.18
Waiting room	26	14
Community size	04	15
* p<.05 ** p<.01		

Controls for Meet Current Expectations and Education

Two factors which we had postulated would be positively related to overall satisfaction --history and neutrality--were negatively related. That is, agencies that discussed neutrality or had a history of providing supervised access prior to funding from the Attorney General (these two factors were highly related to each other; in other words, the values of these factors tend to increase and decrease together, r = .78), were more likely to have clients with lower levels of overall satisfaction. One possible explanation for this is that the composition of clients in these "older" centres differs from the clients of the more recently formed centres, and includes clients who have been in the program for longer periods of time (see Dynamics of Supervised Access).

The next set of regression analyses examined whether characteristics of the organization were significantly related to the overall satisfaction of custodial and non-custodial parents, after the effects attributable to the characteristics of the parents (personal variables) had been taken into consideration. For this reason we forced characteristics of the parents into the equation first, and then entered the organizational variables that were hypothesized to relate to satisfaction (Cohen & Cohen, 1983), using a stepwise regression procedure. The results of this analysis summarized in Table 3.3.14 show that once personal characteristics have been accounted for, only one variable, neutrality, was entered into the equation for custodial parents, and no variables were entered for non-custodial parents.

As shown in Table 3.3.14, the overall model for custodial parents is highly significant F(3,60)=9.27, and accounts for a considerable amount of the observed variability of overall satisfaction (adjusted R-square=.28). However, a comparison of this model, which includes both personal and organizational factors, with the simpler model (see Table 3.3.10) that includes only personal factors reveals that the inclusion of Neutrality does not substantially improve the predictiveness of the model; the  $R^2$  value increased only marginally from .30 to .32. To determine whether the more complex model accounted for significantly more of the variance, we conducted an incremental F-test (e.g., Cohen & Cohen, 1983), which showed that the more complex model did not account for significantly more of the variance (F(1,58)=1.37, n.s.).

Table 3.3.14

# Stepwise Regression between Organizational Variables and Overall Satisfaction Controlling for Personal Characteristics

#### Custodial Parents

EFFECT SIZE			
$\mathbb{R}^2$		.32	
Adjusted R <sup>2</sup>		.28	-
ANALYSIS OF VARIANCE	DF	SUM OF SQUARES	MEAN SQUARE
Regression	3	14.52	4.84
Residual	6057	31.34	.52
F(3,60) = 9.27	p< .000		

VARIABLES IN THE EQUATION			
VARIABLE	В	Т	SIG.T
Meet Current Expectations	.75	3.93	.002
Education	.08	2.08	.04
Neutrality	50	-2.66	.010

# Non-Custodial Parents

No variables were entered into the equation.

## Summary of Regression Analyses

Taken together, four main findings emerge from the regression analyses. Overall, custodial parents were more satisfied with Supervised Access than non-custodial parents. Second, while analyses were able to identify characteristics of custodial parents that were fairly predictive of their overall satisfaction with Supervised Access, we failed to uncover such characteristics for non-custodial parents. Almost all analysis measures derived from non-custodial parents do not relate to one another in ways that we had predicted. For instance, we expected overall satisfaction to relate to non-custodial parents' satisfaction with specific aspects of the program, but this was not the case. Non-custodial parents' attitudes may be more diffuse and less well defined than those of custodial parents and as a consequence there may be more error in their measurement. This may resemble what Converse (1964) has called "non-attitudes." Alternatively, it may be that non-custodial parents differ from custodial parents in terms of factors that are related to satisfaction, and the interview failed to cover these areas.

A third finding to emerge was that once the personal characteristics of parents had been accounted for, the satisfaction with different aspects of Supervised Access and organizational features accounted for a marginal, and non-significant, amount of the variance in overall satisfaction. We believe that personal factors tended to be better predictors of satisfaction than organizational factors because clients varied tremendously, whereas Supervised Access programs were similar to each other. The similarity of programs results from the selection procedures of the Ministry, their monitoring of programs and the policies developed by the Ministry. Because these programs are similar to each other, regression coefficients (other than the constant term) are less likely to be statistically significant. Hence the failure to find a significant effect of organizational factors should not be interpreted to mean that they are unimportant; the lack of variability may have prevented us from finding significance. Indeed, it is possible that the shared organizational features of Supervised Access programs contributed to the high levels of overall satisfaction with Supervised Access compared to the legal system (see Table 3.2.6).

The fourth finding of some interest was that the two best predictors of overall

satisfaction were the extent to which the program met expectations, and levels of education of custodial parents. Based on the Service Quality Model, discussed in more detail in section 3.5 one would expect that clients would be more satisfied if the program met their expectations. This suggests that a very important function during the conversations with prospective parents and others enquiring about the program is to be extremely clear about the nature of Supervised Access. Ensuring that clients have a clear understanding of Supervised Access may be difficult. Parents may be emotionally charged during the interview, and so concerned about certain aspects of the service that they fail to incorporate some of the information provided to them.

Although not predicted, the finding that custodial parents with higher levels of education were more satisfied with the program may reflect a higher level of satisfaction these parents have with several aspects of their life, attributable in part to the greater opportunities more highly educated custodial parents have in employment, and in other areas. More highly educated parents have more opportunities in employment, and in other areas, and so may be more generally pleased with a variety of aspects of their life.

## Access Arrangements used following Supervised Access

During the interviews with parents, those no longer in Supervised Access were asked a few questions about the circumstances surrounding their departure and their new access arrangement. Twenty-two of the 121 respondents reported that they had stopped using the Supervised Access program. With so few observations, we need to be cautious about drawing strong conclusions.

Table 3.3.15 shows the new access arrangements made by parents who had left Supervised Access. As this table shows, 13 had moved to an access arrangement that was either unsupervised (N=10) or informally supervised (N=3). The remaining 9 had no access arrangement. Parents were not asked why they were no longer visiting the children but given other studies (Emery 1988) reasons may include starting another family, personal difficulties in maintaining relationships and the difficulty of maintaining a relationship with their child when they see them infrequently. Whatever the reason, this finding is consistent with the divorce literature that has found that

50% of divorced fathers have stopped seeing their children one year after divorce (Furstenberg, Peterson, Nord, and Zill, 1983).

Table 3.3.15

New Access Arrangement Made by Parents
Who Had Stopped Using Supervised Access

ACCESS ARRANGEMENT	NUMBER
Access supervised by friends or relatives	3
Unsupervised access	10
No access	9
TOTAL	22

# 3.4 Children of Supervised Access

#### 3.4.1 Child Interviews

An important aspect of our study was speaking directly to the children who were involved in visits. A primary goal of the centres participating in the Pilot Project is to provide a "child-focused, safe, neutral and unstigmatized setting" for visits with the non-custodial parent. However, there is no literature concerning children's understanding and experience of this process. Clearly, this information is necessary if centres are to meet their objectives.

The present sample was made up of 8 families who had one child in the study and 9 families who had 2-3 children in the study. The 29 children interviewed ranged in age from 4 1/2 to 14 years old. About half the children (N=14) were four to six years old, while 15 children were seven years of age or older. In recording the comments made by children, the interviewer, a postgraduate student who had worked extensively with children, was careful to record accurately what was said. In reading the comments of children, readers should be aware that the remarks of children are prompted by a variety of factors, and should be interpreted cautiously. In order to ensure that our findings were not affected by the non-independence of subjects, two analyses were performed: one including all children and another in which one child from each multiple-child family was randomly chosen. Results from both analyses were always in the same direction. Below we report data from the whole group.

Children's Likes and Dislikes about the Centres. At the beginning of the interviews, children were asked an open-ended question about what they liked and disliked about the centres. The coding system allowed for multiple responses. Children's answers represent their spontaneous and unprompted views about the centres. The most common reason children gave about what they liked about coming to the centre was to play with the toys (76%). The second most common reason was to see the non-custodial parent (36%). Fewer children reported that they liked playing with other children at the centre (7%), seeing staff (10%), leaving their custodial parent (3%) and visiting other parents (3%). In terms of aspects of the centre that children

did not like, most said nothing (68%) or said things about their families that were not related to centre functioning (e.g. my brother does not play with me, my mother won't play hide and seek). Those complaints that were related to centre functioning were that the toys were for young children or broken, that they did not like it when a parent failed to come for the visit, that it was boring at the centre, and that children and parents always have to be supervised.

Children's Understanding of Rules of Centre and Reasons for Supervised Access. The majority of children (58%) could not give any account of why they came to the centre. A further 17% had only minimal understanding. Twenty-four percent of children showed a detailed and accurate understanding of why they came to the centre, saying things like "I can see dad without mum and dad fighting" or "I can get to know my dad in safe surrounding". The sample was divided into two groups as a function of age. Children who were 7 or older were designated as the older group (N=15) and 4 - 6 year olds comprised the younger group (N=14). Forty-six percent of the older children demonstrated an accurate understanding of why they came to the centre, while none of the younger children did  $(\chi^2(2) = 13.5, p < .001)$ . The same pattern was evident in relation to rules at the centre. Twenty-seven percent of the older children showed an accurate and detailed understanding of the rules and why they were in place. None of the younger children showed such an understanding  $(\chi^2(2) = 7.2, p < .05)$ .

Dissatisfaction with Toys, Activities, and Rules. Children did make some complaints about being at the centre. The most frequently raised complaints were about toys and activities. Sixty-eight percent of children had at least mild dissatisfaction in relation to either the toys or the activities at the centre. Children 7 years and older were more likely to feel dissatisfied than the children 6 years or younger (Fishers' exact test p<.04). Complaints were that the toys were designed for younger children, so that they were boring or too small physically, or that there were restrictions in what the children were allowed to do, such as exploring the building, playing with water etc.

Overall, 24% of children disliked the rules that they had to follow at the centre. These rules involved where they could go and what activities they were permitted.

Children's dissatisfactions in this area were on the whole minor, but a few of the children felt more strongly about these restrictions and said that they did not like being watched, and did not like not being able to leave the premises. Dissatisfaction with rules was not related to age.

Feelings about Staff and Understanding of their Role. Children's feelings about the staff were on the whole very positive. When children mentioned dissatisfactions with staff they were minor (41%). Dissatisfaction most often related to not being allowed to do something that they wanted to do at the centre, wanting staff to play more, etc.

When the children were asked about what the staff did at the centre, very few showed an understanding that the function of the staff was to supervise the parent's interaction with the children. The children that did understand made comments such as "the staff are there to watch us and if Dad asks us a question we can't answer, we ask the workers." (7 year old girl). Another child said the staff are there to "Make sure that dad doesn't do bad things like hurt you. If dad says something bad to you it's not your job to talk to him, talk to the staff." (5 year old boy).

Most of the children did have an awareness that the staff were there to watch them, but they had not specifically related this to their parent needing supervision in his/her interaction with them. For some it did not seem to matter that they were being watched. They gave the impression that this helped them to feel protected or contained, and they showed no evidence of anxiety about why they were being monitored by staff. For example, "They are there to take care of us and make sure nothing happens", "They are there to look after people who get hurt. Helps to heal their wounds." (6 year old male). But for others the awareness of being watched, without really understanding why, seemed to be a source of anxiety. For instance some said that they were being watched so that they did not break anything or so that staff could report on their behaviour to their parents, for example "I don't like it when they talk to Mom (non-custodial parent) when I am not around. I want to know what they say to Mom" (8 year old girl). Another child said "Sometimes you feel like they're watching you, but I guess they're supposed to." (girl, 14 years old). One girl said that she wanted the staff to play more instead of just watching.

Thus it would appear that, for some children, the lack of clarity over why they are visiting the centre can create some difficulties. They know that they are being watched and for some this creates an uncomfortable feeling, as they try to imagine why they are being watched.

Only one child reported that a staff member had become angry with her non-custodial parent. The child said that her mother, the non-custodial parent, had been nasty to her and hit her. There were no other reports of a staff member becoming angry with a parent. It is interesting and encouraging that such incidents are so rare even in such a high risk population. From the children's descriptions it was clear that they did not experience tension between staff and parents at the centres.

Centre structure. As some of the centres operate in one large room, and other centres have separate rooms for different families, children were asked whether they liked being there with their parent on their own, or whether they preferred to be there with other children. The majority of children (58%) said that they would prefer to be there with other children, 27% said that they preferred to be alone with the parent and a further 13% did not care. Older children were somewhat more likely to want to be alone with their parent rather than with a group, but this difference fell short of significance (Fishers exact test, p<.12). For some children the idea of being at the centre with their parent and without other children made them feel quite uncomfortable. For example, one child said, "It's nicer with others. Sometimes I am scared when I am with him so when there are other people around I feel safe." (girl, 8 years).

Summary and Recommendations. The overall impression from the interviews is that most children are happy with the arrangement of going to the centre and they do not experience any significant difficulty in relation to their visits. They enjoy playing with the toys, visiting their parent, and seeing other children. They feel cared for by staff and enjoy their time at the centres. For some, however, it is not such a positive experience. These children's relationship with their non-custodial parent seemed, from their point of view, to be a troubled one. Unfortunate events (seemingly unavoidable) happened at the centre which upset children. For instance one parent told his

children that he would not be coming to see them again. In some instances, even at the centre the children were still caught between two warring parents. For example, one child said "My father has ruined my mother's life" and another child was told by his mother not to tell his father that he loved him (4 year old boy). Other children felt unhappy about how their parent behaved with them "I don't like it when my dad fights with me" (6 year old girl). Although distressing events were relatively uncommon, it was not possible for centres to shield children entirely, and some children did experience conflict and distress.

If centres are going to cater to older children, they need to give more consideration to activities and toys for this age group. Many centres tend to function well for preschool and young school-aged children as they are often situated in daycare facilities, but they are not as well equipped for older children. This may mean that some centres require additional funding to become suitably equipped for older children. Alternatively, when seeking donations of equipment or trying to find space for a Supervised Access centre, the needs of older children should be kept in mind.

Few children have an understanding that the need for supervised access is related to the fact that their parent has to be supervised in his or her interaction with them. For most children this lack of understanding did not seem to be an issue, or at least one that was evident during a short interview. However, the consequence of this for a small number of children is that they wondered why they are being watched so closely, and this made them feel slightly anxious. Custodial and non-custodial parents could be helped by staff to discuss this with children and help them to understand the reason that they are attending the centre and what the staff are doing there and why the children and parents are closely supervised. The cognitive capacity and emotional state of the child must be considered when providing this information.

Centres vary in the design of their facilities. Some place a number of families into a large room and others put families into separate rooms. Most children prefer being with other children and families, perhaps because it "normalizes" the experience for children so sharing a room does not seem to be a problem. As they get older there is a slight tendency for children to want more privacy with their parent.

## 3.4.2 Parent Ratings of Children's Behaviour

Thirty-one custodial parents completed behaviour ratings on their child. If more than one child between the ages of 2-16 was attending a Supervised Access centre, one child from the family was randomly chosen to be the target child. Two instruments were used for data collection. For children under 4 years of age the Child Behaviour Profile for boys and girls ages 2-3 was used. Parents of six children completed this instrument. For children between the ages of 4 and 16 years, the Child Behaviour Checklist (Achenbach, 1991) was completed. Twenty-five parents completed this instrument. These behaviour ratings are screening instruments to determine the presence of emotional and behavioral problems in children. Our purpose in collecting these data was to determine how many children in the population of children attending Supervised Access programs were showing emotional or behavioral problems.

Two scores are derived from both of these assessments. One is a score for internalizing difficulties. These involve behaviours or emotional states such as loneliness, withdrawal, fearfulness, depression, guilt, and somatic complaints. The second score is an externalizing score. In 2-3 year old children this involves behaviours such as aggression, and destructiveness. In older children externalizing problems involve behaviours such as destructiveness, stealing, swearing, aggression, and disobedience. These scales have been standardized on large numbers of children in the general population. Raw scores are converted to standard scores (T scores) and by comparing the standard scores of the Supervised Access sample with the standard scores from a general population of children, we get a good indication of the degree of risk that children in Supervised Access are experiencing.

Children who receive a T score of 70 or over on either internalizing or externalizing problems, are designated to be functioning in the clinical or disturbed range. In the general population, only 2% of children obtain such a high score. In the 4-12 age range, sixteen percent of Supervised access children (4 out of 25) showed internalizing behaviour in the clinical range. Thus children in Supervised Access were 8 times more likely to show internalizing behaviour disorders than a comparable age group in the

general population. In the 4-12 age range, twenty-eight percent of children attending supervised access showed externalizing behaviours in the clinical range. Thus older children in supervised access were 14 times more likely to show externalizing behaviour disorders than children in the general population. None of the two-three year old children showed internalizing or externalizing behaviour in the clinical range.

In conclusion, according to reports of custodial parents, children between 4-12 years old, attending Supervised Access, are much more likely to be showing disturbance than children in the general population. This is not surprising because rates of childhood disturbance increase as levels of stress in children's lives increase. Stresses which are known to be associated with increased risk to children are parental conflict (Jenkins and Smith, 1991); parental divorce (Emery, 1988); psychiatric disability in parents (Rutter and Quinton, 1985) poverty (Costello, 1989) as well as numerous others factors. Children attending Supervised Access Centres are very likely to have experienced at least one of these risks and many will have experienced several. In relation to the young age group, we should not conclude that they are not at risk of disorder. The sample size for the younger children was very small (N=6), making it unlikely that in such a small group of children we would find even one child with disorder. It is also the case that instruments for detecting disorder are less well developed for the young age group.

Although the finding of increased rates of disorder amongst this group of children is not surprising, it has important implications for practice with children and families. Supervised Access centres could function as an early source of referral for children in difficulties. If parents were concerned about their children's behaviour and did want to seek therapeutic help, supervisors could facilitate referrals to appropriate local agencies. It is important for supervisors to know that they are dealing with a population of children who are at high risk of emotional and behavioral problems. These findings also suggest that training should make coordinators, other staff, and volunteers aware of the special needs of these children, and services in the community which can respond to these needs.

# 3.5 Service Quality

## 3.5.1 Service Quality Model

In a recent report titled "Best Value for Tax Dollars: Improving Service Quality in the Ontario government", (Government of Ontario, 1992) it was argued that the Ontario government had to consider ways of providing better services for less money. It proposed that an important way to do this was by improving the quality of services to the public. In order to do this, the paper suggested that the government must identify its customers, have them define their requirements, and then design and deliver services that meet these requirements.

Citing a service quality model developed by Parasuraman, Zeithaml, and Berry (1985), the report proposed that customers assess service quality by comparing the services they receive with the services that they expect they should receive. To the extent that there is a discrepancy between the services expected and those received, there is a gap and an opportunity for government to improve its services to the public. More specifically, the report identified four different types of gaps. These were:

- an understanding gap, which is the difference between the customer's views and the provider's views of services;
- a design gap, which exists when the provider does not design to meet the customer's requirements;
- a delivery gap, which is caused when the service being delivered was not that intended; and
- a communications gap, which refers to the difference between the services promised, and actually delivered.

After considering the quality of service framework, and its applicability to Supervised Access, we have concluded that although it provides some useful ways of thinking about quality of service, a problem in using this model to assess Supervised Access is that it assumes that customer satisfaction is determined by how successfully the provider can meet the needs of that customer, and does not depend upon the services provided to other customers. This assumption is reasonable in many situations. For

example, in most economic transactions such as buying groceries, or having a car repaired, the satisfaction of a customer depends only upon the quality of service received by that customer. Many non-economic transactions are also of this sort. For example, my satisfaction in obtaining a health card depends only upon the service I receive while getting my card. It does not depend upon the kind of service others have received.

In Supervised Access, however, the satisfaction of one parent may depend critically upon the services Supervised Access provided to the other parent. For example, if a Supervised Access program permits a non-custodial parent to spend more time with his child than the custodial parent wants or allows the non-custodial parent to take the child off-site, these actions will increase the non-custodial parent's satisfaction, but decrease that of the custodial parent. For this reason the quality of Supervised Access cannot be evaluated solely within the service quality framework. We believe that two other factors must be also taken into consideration.

First, it is necessary to evaluate separately the satisfaction of custodial parents, non-custodial parents, and children, because each of these clients has different preferences and needs, and hence may evaluate a provider's behaviour differently. For instance, custodial parents prefer visits to occur in a restricted, closely supervised manner, whereas non-custodial parents prefer unsupervised, unrestricted access. Hence, if Supervised Access centres decided to change their service so that it better met the needs of a non-custodial parent, (e.g., by less intrusive supervision) it could upset custodial parents.

Second, the Supervised Access program should be examined to determine to what extent it is seen as "neutral" by each of the parties. The neutrality guideline is critical in our view because it provides staff with a criterion against which to evaluate its planned actions in situations when it can be anticipated that planned actions will not satisfy all participants.

Many government programs probably deal with situations that resemble supervised access in that there are multiple parties with conflicting objectives. This characteristic

may be particularly evident in programs administered by the Ministry of the Attorney General and in other Ministries such as Labour, that are concerned with mediation and negotiation, issues that involve two or more parties in conflict with one another (e.g., Raiffa, 1982).

In summary, we analyzed service quality by determining the extent to which there was evidence of the four gaps identified by the service quality model. We report this evidence for custodial parents, non-custodial parents, and children separately. In addition, we determined to what extent centres are perceived to act neutrally.

#### 3.5.2 Results

Service Quality Gap. One of the more striking findings of this study was the high overall level of satisfaction of custodial and non-custodial parents with Supervised Access, especially in comparison to the legal system. Custodial and non-custodial parents were also satisfied with the different aspects of service, although as one might expect non-custodial parents disliked the restriction of visits to the site, whereas custodial parents were happy with this aspect of the service. Interviews with children also revealed that they tended to be happy visiting Supervised Access centres.

There was some evidence of a gap between the services parents expected and those available. A few (see Table 3.2.8) custodial and non-custodial parents expected to obtain counselling and mediation services, and some parents were apparently unaware that centres provide exchanges. Moreover, 43% of non-custodial parents and 27% of custodial parents reported that their expectations of Supervised Access had changed since they began participating in Supervised Access. The results from the regression analyses also showed that satisfaction of custodial parents was higher when the program met expectations. Finally, the child interviews suggest that some children do not have a clear understanding of why they were at the centre.

Taken together, these results suggest that centres may need to spend more time during the intake process and during the initial visits with parents and children explaining to them such things as purpose of Supervised Access, rules at the centre, and services provided. Ensuring that parents and children understand the nature of Supervised Access may be difficult and could take some time to accomplish. Many parents and children are in the midst of an emotionally trying time in their lives, and may find it difficult to process information describing Supervised Access.

Design Gap. For custodial parents the most important feature of a Supervised Access centre is that it should be safe for them and for their children. Many custodial parents have concerns about abuse, are afraid about child abduction, or of being assaulted.

Several lines of evidence suggest that the safety concerns of custodial parents have been addressed. First, there have been relatively few critical incidents, given the population being served, and number of visits supervised. Second, custodial parents report that they feel safe for themselves and for their children. Finally, coordinators have reported taking fairly extensive measures to ensure the safety of all participants.

Non-custodial parents are satisfied with most aspects of Supervised Access, but tend to be dissatisfied with the degree of supervision, and the restriction of visits to the centre. Because these features are viewed positively by custodial parents, any changes of these features to please non-custodial parents would displease custodial parents.

Findings from the study suggest that the environment, while suitable for younger children, is not as well suited for children over 9 or 10 years of age.

Communications Gap. The findings from the study suggest that coordinators spend much of their time talking to parties with an interest in visits and exchanges. This includes custodial parents, non-custodial parents and their lawyers, and generally these parties are quite satisfied with Supervised Access.

In terms of communication with the community to ensure that it knows about the program, findings from the study suggest that the legal community of judges and lawyers involved in access and custody is familiar with Supervised Access. Indeed, the legal system appears to function as the primary point of access to Supervised Access

for most families.

One judge raised the possibility that parents without legal representation who might need Supervised Access, might not learn about this service. This point seems plausible to us since the legal system appears to act as the primary point of access to Supervised Access for most families. Still, it should be noted that parents can learn about Supervised Access in other ways such as through the court, through a social service agency, or through advertising undertaken by the centre.

<u>Delivery Gap</u>. The study uncovered no evidence of a gap between the intended and actual delivery of the program.

Neutrality. A cornerstone of Supervised Access is its neutrality. This study found that coordinators were concerned about neutrality and tried to ensure that their centres acted neutrally by developing policies and procedures, through training of staff, and by limiting the nature of the interaction with parents. Coordinators also reported that faced with a difficult decision not covered by the court order, they would seek guidance from the court or from lawyers. In spite of these efforts to ensure neutrality, several staff have reported that they have encountered situations in which they were uncertain about what they should do in order to ensure the neutrality of the visit.

Despite the difficulties of behaving neutrally, most custodial and non-custodial parents reported that staff at the centres behaved neutrally. The only group to question the neutrality of centres were some of the community groups that acted as advocates on behalf of custodial parents or non-custodial parents.

# 3.6 Impacts

# 3.6.1 Impact on Legal System

### Lawyers

General Background. A total of 14 lawyers, 8 male and 6 female, were interviewed

throughout Ontario. At the time of the interview the lawyers had been aware of Supervised Access for 12 months on average, and tended to first become aware of it through their colleagues (7), the court (2), or the centre (1). All but one of the lawyers felt that the majority of lawyers in their community were aware of their local centre. The centre itself was reported to be either meeting demand (11), or not able to meet demand due to limitations on its current resources (3).

Four lawyers felt that the needs of some members of the community were not met by the Supervised Access program. These groups might include people who lived far from the centre, some middle class parents who opt not to use the service, and certain ethnic groups.

Legal Practice. Eight lawyers practised in firms which employed 2-5 lawyers. All the interviewed lawyers were experienced in family law, and nine of the fourteen indicated that over 75% of their practice was devoted to family law cases. All 14 lawyers stated that they represented both mothers and fathers in family law cases; seven lawyers sat on the Official Guardian's panel. Thirteen lawyers reported handling more than 30 cases a year where custody or access had been an issue. In many of these cases Supervised Access was considered. All lawyers had referred clients to the Supervised Access centre; the majority had referred more than 10 clients to Supervised Access. Thirteen lawyers stated that they were in contact with the Supervised Access centre at least once per month, or more. In sum, the lawyers interviewed were experienced in family law, and familiar with the Supervised Access program.

Most lawyers reported that they played the central role in referring clients to the centre. Some lawyers reported that the issue was first raised by them but ordered by the judge. Lawyers reported that referrals were typically made by court order although occasionally referrals were made on a volunteer basis. Most of the court-ordered referrals were made on consent, although several were on a contested motion. Most lawyers reported that supervised access was most often arranged through the centre, although in about 10% of the supervised access cases informal supervised access arrangements were made.

Impacts on Legal System. Eleven lawyers had practised family law prior to the Supervised Access centre opening in their community and were therefore in a position to compare whether supervised access was being ordered more frequently since the Supervised Access centre had opened. All eleven lawyers, who were able to answer the question, because they had practised family law prior to the opening of the Supervised Access centres, reported in their opinion that after the centre had opened there had been an increase in ordering supervised access, which they attributed to the availability of the centre.

To gain insight into the impact of Supervised Access, lawyers were asked how their clients would be affected if the Supervised Access centre was unavailable in their community. Most lawyers felt that use of informal supervised access arrangements would increase, an arrangement that was largely believed to be unsatisfactory. Some lawyers (N = 3) reported that some of their clients would be unable to obtain access. Finally, three lawyers felt that more time would be spent in court fighting about access because no satisfactory access arrangement could be made.

Satisfaction with Centre. Lawyers were asked to rate their satisfaction with several aspects of Supervised Access centres.

Overall, all lawyers were satisfied with their Supervised Access centre and 86% of the lawyers felt their clients were also very satisfied with the centre.

Finally, the interviewer asked lawyers how satisfied they were with a number of aspects of the Supervised Access centre (see Table 3.6.1). For the most part, the lawyers expressed very positive ratings for almost all of the aspects listed. With respect to volunteers and user fees some lawyers (5 and 6 respectively) could not provide a rating because associated centres probably did not have these aspects in place. In addition, 13 lawyers were unable to rate their satisfaction with Attorney General Policies, because they were unfamiliar with them.

Table 3.6.1
Number of Lawyers Satisfied with Aspects of Supervised Access Centres

ASPECT OF CENTRE	LEVEL OF SATISFACTION					
	Very Satisfied	Satisfied	Neutral	Dis- satisfied	Very Dis- satisfied	Don't Know/Not Applicable
Staff	12	2	0	0	0	0
Volunteers	7	1	1	0	0	5
Facilities	9	4	1	0	0	0
Accessibility	12	2	0	0	0	0
User Fees	4	3	1	0	0	6
Rules of Centre	10	4	0	0	0	0
Attorney General Policies	1	0	0	0	0	13
Provision of Reports Describing Visits	8	3	0	1	0	2
Safety	12	1	1	0	0	0
Neutrality	12	2	0	0	0	0

Changes to Centre. The final interview questions addressed possible changes and/or recommendations with respect to the Supervised Access centre. Seven lawyers stated that they would like to see two particular aspects changed: the number of hours should be increased; and the number of centres/sites should be increased. Transportation assistance, social work/counsellor assistance for parents dealing with access issues, parenting courses and improved court reports constituted some of the other more commonly suggested changes/recommendations. No lawyers identified any Supervised Access services to be eliminated.

The notion that Supervised Access programs consider expanding their services to provide parenting courses and mediation requires careful consideration. Although there is a need for these services, there is also a danger that provision of these services may duplicate services available elsewhere and jeopardize the perceived neutrality of the centre and its staff. One way to meet the needs of families, and run less risk of being perceived as non-neutral, would be for the coordinator of the Supervised Access centre to be aware that some families may need these services, and to refer families needing these services to the appropriate agency.

Overall, 13 of the 14 lawyers interviewed exhibited a very positive attitude and stated that the program is a necessary and essential service which not only benefits involved family members, but also saves the legal system (lawyers and courts) time and money. Although almost all lawyers suggested that the program should be kept in place, a few felt that it should only be used to provide a short-term bridging mechanism for parents.

# Judges

General Background. A total of 13 judges were interviewed. Of these, 11 were male and 2 were female. Seven of the judges had been on the bench for over 10 years. Almost all judges interviewed spent more than a quarter of their time hearing family law cases. All judges interviewed had been aware of Supervised Access since its inception and five judges were aware of it even before it came into existence, having helped in its planning or supported its application for funding. Tweive of the judges interviewed believed that all other judges in their jurisdiction who were responsible

for family law cases were aware of the Supervised Access centre. The judges interviewed had become aware of the centre from a variety of sources which included: the centre coordinator (4), the sponsoring agency (2), lawyers/colleagues (4) and the Ministry (1).

Supervised Access Centre. All but one judge reported that the centre was meeting demand for service (8), or that demand exceeded centre capacity (4). Ten judges felt that the centres were providing services to groups needing it, though some judges felt that Supervised Access should be used, only for short periods of time. Four judges mentioned the Aboriginal and First Nations communities, but were unsure about whether the needs of those communities were being met.

Judges were asked a series of questions aimed at determining the percentage of cases involving custody and access issues, which were referred to the Supervised Access program. Most judges had a very difficult time responding to these questions, but their responses suggest that only a relatively small percentage of families who appear in court, and whose cases involve custody and access, are referred to Supervised Access programs.

Legal Impacts. One method used to investigate the impact of Supervised Access was to ask judges what would happen if it were unavailable in the community. All judges reported that they would revert back to the old method of ordering access arrangements which would not effectively serve the needs of parents and children. The old method of providing Supervised Access involved having each party nominate people such as friends, relatives, neighbours and ministers who might supervise access. This method was often unsatisfactory for a number of reasons:

- it is difficult to find some one prepared to take on the responsibility of supervision when parents are in such great conflict;
- people in isolated areas or new to the community have trouble finding people to nominate because they are not part of a social network;
- nominations presented from one side are often suspected of bias by the other side; and
- it might mean that a parent would be deprived of access, if no one

could be found to supervise access.

Ten judges said that they ordered Supervised Access more frequently since the Supervised Access centre opened, while two said they did not and one indicated he/she did not know. The usual reason given for ordering more Supervised Access was that it offered a short-term workable solution that provided a sense of security to those involved. Prior to the availability of Supervised Access, cases would have to go to trial or no access would be ordered. However, now that centres are operating, lawyers for both parties are, in some cases meeting with each other, and if they can come to an agreement, they by-pass the court system all together and approach the Supervised Access centre directly.

Eight judges said that, in general, cases involving Supervised Access issues involve more court appearances and take more time than other family law cases where custody and access are an issue, because of the complexity of the issues (e.g., abuse) involved.

We asked judges to speculate about the effect of the Supervised Access program on cases where families did use the program. When asked if court appearances would have increased had the families not used Supervised Access, ten said they would. Often, when parents meet over access it becomes a flash point that results in conflict; using the program has a calming effect on the dispute. Without Supervised Access, 12 judges interviewed said cases would have taken up more court time and 9 felt the cases would have involved more hostility. Judges reported that it is very difficult to find and maintain appropriate informal supervisors for visits. Hostility can be heightened when there are allegations of bias against the supervisor and cases often end up back in court if the supervision arrangement breaks down. According to the judges interviewed, the centre acts as a safety valve, a diffuser of hostility and provides an opportunity to move towards a more normalized access arrangement.

<u>Satisfaction with Centre</u>. Judges were asked to rate the satisfaction of families using Supervised Access as well as their own levels of satisfaction.

On the whole, 10 judges felt that families were satisfied with the program, although they noted that neither party is totally satisfied. Often the custodial parent wants no access and the non-custodial parent wants unrestricted access. Supervised Access allows for a compromise.

Overall, judges rated the program very highly with 12 saying they were very satisfied and one saying he/she was satisfied.

The interview also asked the judges how satisfied they were with a number of aspects of the Supervised Access centre (see Table 3.6.2). For the most part, judges expressed very positive ratings about the program though judges lacked knowledge about the specifics of the program. Two judges were dissatisfied with the Attorney General's policy of restricting visits to the site, while two others felt there were an inadequate number of centres and one judge indicated that the hours of operation were too short.

Table 3.6.2

Number of Judges Satisfied with Aspects of Supervised Access Centre

ASPECT OF CENTRE	LEVEL OF SATISFACTION					
	Very Satisfied	Satisfied	Neutral	Dis- satisfied	Very Dis- satisfied	Don't Know/Not Applicable
Staff	10	0	0	0	0	3
Volunteers	6	1	0	0	0	6
Facilities	9	1	0	0	0	3
Accessibility	9	1	1	0	0	2
User Fees	2	2	0	0	0	. 9
Rules of Centre .	8	0 .	1	0	0	4
Attorney General Policies	2	0	1	1	0	9
Provision of Reports Describing Visits	10	1	0	1	0	1
Safety	8	1	0	0	0	4
Neutrality	11	0	0	0	0	2

<u>Changes</u>. Five judges recommended that there should be an increase in the hours of operation, and that parent support programs (mediation, parenting skills) should be made available through other community agencies.<sup>30</sup> More centres, staff and publicity were also mentioned as well as the need for a transportation service.

Overall, all the judges were very positive about the program and a few wondered how they had managed before it was in place. Three judges felt that it was cost-effective because without it there would be an increase in legal aid costs; two judges questioned if costs could be brought down by using more volunteers. Two judges recommended that it should only be utilized as a short-term bridging mechanism to other arrangements.

# 3.6.2 Impacts on Parents

In the course of this evaluation it has been suggested by judges, lawyers, and coordinators that in some cases Supervised Access reduces the level of hostility between parents, making it possible after a short while for them to change to an unsupervised access arrangement.

In this part of the study we sought to obtain direct evidence that attending Supervised Access improved attitudes and behaviours of children and parents. We did this by administering one section of the parent questionnaire twice, at two points in time approximately six months apart to a sample of custodial and non-custodial parents in the Supervised Access program<sup>31</sup>. If attendance at a Supervised Access centre does change attitudes, then one would expect less hostility and more frequent interaction between parents at the time of the second interview compared to the first, as well as changes in children's mood, parenting behaviour etc.

#### Results

Frequency of Contact. Most parents reported (81% at time 1, and 78% at time 2) that they have no contact with the other parent. There was no significant change

<sup>&</sup>lt;sup>30</sup>Because these agencies provide services outside of the Attorney General mandate they would not be funded by that Ministry.

<sup>&</sup>lt;sup>31</sup> Further details about the method are presented in section 2.

between time 1 and time 2<sup>32</sup>. In about 44% of the cases where there was little or no contact, there was a restraining order. For those few parents who maintained contact, it was usually by phone or face-to-face.

Child as Intermediary. The divorce literature suggests that separated and divorced parents sometimes communicate by giving their child a message to pass onto their exspouse. This behaviour was not reported by Supervised Access parents. Almost all parents at both points in time (91% at time 1, and 82% at time 2) reported that they never communicate with the other parent through their child. The difference between time 1 and time 2 was not significant. Perhaps the absence of this behaviour among these parents is attributable to the Supervised Access program that does not permit this type of behaviour. Alternatively, parents may not have reported giving messages to their children to pass onto their ex-spouses because they know that this behaviour is not permitted by the program.

As with other divorced and separated parents, some Supervised Access parents reported that the other parent said upsetting things about them to their children. In the first interview 38% of the parents reported that this had occurred one or more times in the past month. This increased marginally, but not significantly to 41% by the second interview.

Many Supervised Access parents also reported that they had felt undermined because the other parent had given the child candy, allowed the child to behave in ways that were "inappropriate", and so on. At the time of the first interview, 20% of the parents felt very or moderately undermined, and 26% felt somewhat or a little undermined. By the second interview 43% felt very or moderately undermined, and 20% felt somewhat or a little undermined. The responses at time 1 and time 2 were significantly different.

During both interviews (43% in time 1, 35% in time 2) parents reported that in the past three months their child had felt a conflict of loyalties between parents. The

<sup>&</sup>lt;sup>32</sup> The difference between time 1 and time 2 was assessed by a Wilcoxon Matched-Pairs signed-ranks test. This test was performed on the entire sample, and on separate sub-samples of custodial and non-custodial parents. Throughout this section, significance was set at the .05 level.

difference between interviews was not significant.

Hostility Toward Other Parent. Most parents (57% in first interview, 67% in second interview) reported it was likely that a 10 minute conversation with their ex-spouse would end in conflict. This difference was not significant. Similarly most parents, (71% in first interview, 71% in second interview) reported that if they had to try and make a decision jointly with their ex-spouse, their ex-spouse would probably lose his/her temper.

Impacts on Child. Custodial and non-custodial parents were asked to rate their child's mood just before and just after their last two Supervised Access visits. Analysis of the findings showed that there was no difference between the first and second interviews. Accordingly the results, presented in Table 3.6.3, show the ratings of the child's mood before and after visits for custodial and non-custodial parents, averaged across the two interviews. The primary finding is that custodial parents felt that their children were less happy before and after visits than non-custodial parents. These results need to be interpreted with caution, however, because they are based on the reports of parents with agendas of their own, observing their children who may hide their true feelings so as to please their parents.

Table 3.6.3

Rating of Child's Mood Before and After Visits

Parent	Before			After		
	Нарру	Neutral	Unhappy	Нарру	Neutral	Unhappy
Custodial Parent	40	40	19	30	40	30
Non- Custodial Parent	68	29	3	68	13	18

Parenting activities of Custodial Parent. We examined various aspects of parenting (activities with children, routines and monitoring children) which can be negatively affected following the stress of divorce. We hypothesized that one of the impacts of supervised access may be to lessen stress on custodial parents (as they will be less frightened for their own and their children's well being) which in turn may positively affect their parenting. We found no evidence that supervised access affected the parenting of custodial parents.

Conclusions. This section of the report investigated whether being in Supervised Access reduced the feeling of anger/hostility of custodial and non-custodial parents toward each other, altered the mood of the child, reduced the frequency of children acting as intermediaries ore altered the parenting of custodial parents. Results provide little support for such changes, and suggest that the attitudes, mood and behaviours of parents and children tend to remain stable over time.

We are cautious about drawing this conclusion because some aspects of the study reduced our chances of detecting a reduction in relative feelings or behaviours. First, only 4 of the 51 parents studied, actually left the Supervised Access program after completing the questionnaire for the first time, and before answering it for the second time. This is the group of parents most likely to show the effect being sought. Second, respondents tended to use only a limited range of the responses available to them in answering questions. This suggest that the sensitivity of the measures could be improved. Third, perhaps not enough time has elapsed between interviews for differences to show up.

# 4 CONCLUDING COMMENTS

Supervised Access is typically a short-term program used by a relatively small number of families. It is closely connected to the legal system, which is the means by which most parents become aware of the program, and are referred to it. Judges and lawyers who work extensively in family law were quite familiar with the program and are enthusiastic about it. Custodial parents, non-custodial parents and children who receive Supervised Access services are generally satisfied with Supervised Access. The satisfaction of parents is particularly striking given how dissatisfied they were with the functioning of the legal system in matters of custody and access, and their level of conflict with each other.

Short-term program. There was considerable movement of families in and out of the Supervised Access program each month. The data suggest that families stayed in the program on average for 7.5 months, confirming reports by coordinators and others that Supervised Access is a short-term arrangement for most families. This finding is also consistent with reports from judges that they tend to view Supervised Access as a short-term arrangement. Data from programs in operation for several years suggest, however, that Supervised Access may be a long-term arrangement for some families, and that as the program operates for longer periods of time, these families increasingly constitute the clients served by Supervised Access programs. The Ministry may want to investigate these findings in more depth to determine whether policies need to be developed to deal with parents using Supervised Access for long periods of time.

Size of program. The report also estimated the rate of use of Supervised Access program per 1,000 Ontario residents. The findings revealed that rate of use varied considerably from centre to centre from a minimum estimate of .02 to a maximum of .4, families per thousand with the mean estimate of .16. Using these rate figures it is possible to estimate how many families in Ontario<sup>33</sup> would use the service, should it be offered throughout the province. Based on the mean estimate, these calculations suggest that about 1,700 families would use the service at any given time throughout Ontario. In other words, Supervised Access is probably best thought of as a

<sup>33</sup> For these estimates, we used the Statistics Canada: Census, 1991, estimate of 10,084,885.

specialized program used by only small numbers of people for a short period of time.<sup>34</sup>

Services Required. The study found that families using Supervised Access frequently need services in addition to those currently provided by the Supervised Access program. Lawyers, for example, suggested that some parents may need parenting courses and counselling assistance. The study also found that children and their families tend to be at risk and may need clinical counselling: If the policy of limiting services provided by Supervised Access to visits and exchanges remains in effect, then the Ministry should ensure that coordinators are aware that parents and their children seen by them may require other services. Since this is currently a responsibility of coordinators, it is important to ensure that coordinators know about the problems parents and children may have, behavioral indicators of these problems, and available services in the community to which parents and children can be referred.

Model of Service Quality. Overali, the evaluation found Supervised Access was delivering services wanted by its clients. There appeared to be two broad areas in need of improvement. First, some custodial parents, non-custodial parents, and children did not fully understand Supervised Access. Centres may need to spend more time during the intake process and during the initial visits with parents and children explaining to them such things as purpose of Supervised Access, rules at the centre, and services provided. As previously noted, the emotional state of the parents and children may make such explanations more difficult. Second, children ten years of age and over may not be as well served by the program as younger children.

Impacts. The lawyers and judges interviewed were experienced in family law, familiar with the Supervised Access program, and shared similar views about Supervised Access and its impact on the legal system. Both judges and lawyers were very satisfied with the Supervised Access program, and believe that the absence of a Supervised Access program would increase the use of informal supervised access arrangements which they reported were often unsatisfactory. It would also increase the number of clients without any access arrangement.

<sup>&</sup>lt;sup>34</sup>Even, if one uses the highest rate estimate of .4, this figure suggests that about 4,100 families will use the service.

There is a feeling that Supervised Access may save the legal system time and money. While the strength and consistency of the views of lawyers and judges is impressive, one must also keep in mind that their views are opinions and not based on systematically collected data, and accordingly must be interpreted cautiously. In our view it is not yet possible to determine whether Supervised Access will save the government money if adopted.

There are a few reasons for our uncertainty. First, our sense is that lawyers and judges in asserting cost savings took into consideration their own savings in time, but probably did not factor in the costs of operating the Supervised Access program. Second, the presence of formal supervised access arrangements has been reported by some lawyers and judges to increase the number of families using this service. This suggests that it may cost the legal system on average less money, to have a family in formal Supervised Access compared to an informal supervised access arrangement. At an aggregate level of the program, however, introduction of Supervised Access could increase costs to government. The reason: introduction of a formal Supervised Access program, increases use of supervised access<sup>35</sup>, according to judges and lawyers, though we do not know by how much.

<sup>&</sup>lt;sup>35</sup>The increased use of formal Supervised Access vs. informal supervised access, may be viewed positively from an equity perspective, of in terms of the perceived usefulness and quality of the service. However, as pointed out in this section, it may the cost the overnment somewhat more money.

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# APPENDIX A

Community Groups/Agencies Interviewed

C	OMMUNITY GROUPS/AGENCIES INTERVIEWED				
Belleville	Three Oaks Foundation (Women's Shelter)				
Brantford	Nova Vita Women's Shelter				
Durham	Denise House (Women's Shelter)				
Kitchener	i) Family Crisis Centre ii) Fathers for Justice				
London	Women's Community House				
Midland	Rosewood Shelter				
North Bay	Transition House (Shelter)				
Peel	i) Salvation Army-Family Life Resource ii) In Search of Justice (Fathers' Rights)				
The District of Rainy River	Atikokan Crisis Centre				
Sault Ste. Marie	Oakland Place - Women in Crisis in Algoma				
Windsor	Hiatus House (Women's Shelter)				
York	Yellow Brick House (Women's Shelter)				
Toronto	Woman's Habitat (Women's Shelter)				
Cornwall	i) Canadian Mental Health Association ii) Baldwin House (Women's Shelter)				

# APPENDIX B

List of Variables Used in Regression Analyses

# List of Variables Used in Regression Analyses

Name Label

# QI6 OVERALL SATISFACTION WITH SAP

Value Label

- 1 VERY DISSATISFIED
- 2 SOMEWHAT DISSATISFIED
- 3 NEUTRAL
- 4 SOMEWHAT SATISFIED
- 5 VERY SATISFIED

# DUMMY Participant Dummy Variable

Value Label

0 non-custodial

1 custodial

#### MARITAL marital status

Value Label

0 separated/divorced/single

1 remarried/common-law

# MEETEXP1 SAP MEET CURRENT EXPECTN?

Value Label

ON 0

1 YES

# PREF1 1ST PREF: NO ACCESS

Value Label

0 no

1 yes

# PREF2 1ST PREF: SUPVD ACCESS

Value Label

0 no

1 yes

#### PREF3 1ST PREF: UNSUPVD ACCESS

Value Label

0 no

1 yes

# QII LENGTH SEPARATED (WEEKS)

Missing Values: 777, 888, 999

Value Label

777 M D/K

888 M REFUSED

999 M N/A

# QII17A SAP ASPECT SATISFACTION-SERVICE HOURS

#### Value Label

- 1 VERY DISSATISFIED
- 2 SOMEWHAT DISSATISFIED
- 3 NEUTRAL
- 4 SOMEWHAT SATISFIED
- 5 VERY SATISFIED

#### OII17B SAP ASPECT SATISFACTION-FACILITIES/EQUIP.

#### Value Label

- 1 VERY DISSATISFIED
- 2 SOMEWHAT DISSATISFIED
- 3 NEUTRAL
- 4 SOMEWHAT SATISFIED
- 5 VERY SATISFIED

# QII17C SAP ASPECT SATISFACTION-STAFF NEUTRALITY

# Value Label

- 1 VERY DISSATISFIED
- 2 SOMEWHAT DISSATISFIED
- 3 NEUTRAL
- 4 SOMEWHAT SATISFIED
- 5 VERY SATISFIED

# OII17D SAP ASPECT SATISFACTION-SAFETY/ENVIRON./CHILD

#### Value Label

1) ( )

- 1 VERY DISSATISFIED
- 2 SOMEWHAT DISSATISFIED
- 3 NEUTRAL
- 4 SOMEWHAT SATISFIED
- 5 VERY SATISFIED

# QII17E SAP ASPECT SATISFACTION-SAFETY/ENVIRON./SELF

#### Value Label

- 1 VERY DISSATISFIED
- 2 SOMEWHAT DISSATISFIED
- 3 NEUTRAL
- 4 SOMEWHAT SATISFIED
- 5 VERY SATISFIED

#### QII17F SAP ASPECT SATISFACTION-VISITS ON SITE ONLY

#### Value Label

- 1 VERY DISSATISFIED
- 2 SOMEWHAT DISSATISFIED
- 3 NEUTRAL
- 4 SOMEWHAT SATISFIED
- 5 VERY SATISFIED

#### QII17G SAP ASPECT SATISFACTION-GROUP SETTING

#### Value Label

- 1 VERY DISSATISFIED
- 2 SOMEWHAT DISSATISFIED
- 3 NEUTRAL
- 4 SOMEWHAT SATISFIED
- 5 VERY SATISFIED

# QII17H SAP ASPECT SATISFACTION-REPORTS ON VISITS

#### Value Label

- 1 VERY DISSATISFIED
- 2 SOMEWHAT DISSATISFIED
- 3 NEUTRAL
- 4 SOMEWHAT SATISFIED
- 5 VERY SATISFIED

# QII17I SAP ASPECT SATISFACTION-PROG. LOCATION

#### Value Label

- 1 VERY DISSATISFIED
- 2 SOMEWHAT DISSATISFIED
- 3 NEUTRAL
- 4 SOMEWHAT SATISFIED
- 5 VERY SATISFIED

### OII17J SAP ASPECT SATISFACTION-STAFF

#### Value Label

- 1 VERY DISSATISFIED
- 2 SOMEWHAT DISSATISFIED
- 3 NEUTRAL
- 4 SOMEWHAT SATISFIED
- 5 VERY SATISFIED

#### OII17K SAP ASPECT SATISFACTION-CENTRE RULES

#### Value Label

- 1 VERY DISSATISFIED
- 2 SOMEWHAT DISSATISFIED
- 3 NEUTRAL
- 4 SOMEWHAT SATISFIED
- 5 VERY SATISFIED

# QII19 YEARS OF EDUCATION (PARENTS)

Value Label

-1.66000+308 MISSING 88 REFUSED

# QII20 CURRENTLY HAVE JOB?

Value Label

0 NO, HAVE NO JOB

1 YES, HAVE A JOB

# REASON1 ABUSE/ABDUCTION

Value Label

0 NO

1 YES

#### REASON2 CONVENIENCE/BEST FOR KID

Value Label

0 NO

1 YES

# REASON24 REASON2/REASON4 COMBINED

Value Label

0 REASON2 NE 1 AND REASON4 NE 1

1 REASON2=1 OR REASON4=1

# REASON3 CP/COURT REQUEST

Value Label

0 NO

1 YES

#### REASON4 NCP AWAY FROM KID FOR TOO LONG

Value Label

0 NO

1 YES

### REASONS OTHER

Value Label

0 NO

1 YES

# REASON6 PARENTING ABILITY

Value Label

0 NO

1 YES

#### REASON7 PSYCHIATRIC DISABILITY/ALCOHOL/DRUG ABUSE

Value Label

0 NO

1 YES

#### REASON8 WIFE ASSAULT/UNRESOLVED CONFLICT

Value Label

0 NO

1 YES

#### CHILDREN DOES CHILD BENEFIT MOST FROM SAP?

Value Label

0 NO, NCP BENEFITS MOST

1 YES, CHILD BENEFITS MOST

EDUC1 >= UNIVERSITY (COORDINATOR)

Value Label

0 NO

1 YES

### EXPERIENCE YEARS OF EXPERIENCE IN THE AREA

#### HISTORY WITH PREVIOUS EXPERIENCE?

Value Label

0 NO

1 YES

# LINKED DEPENDENCE OF A CENTRE

Value Label

0 STANDALONE

1 LINKED TO AN ORGANIZATION

# NEUTRAL NEUTRALITY OF PROGRAM

Value Label

0 NO

1 YES

# PARKING PARKING LOTS AVAILABLE?

Value Label

0 NO

1 YES

#### SIZECOMM SIZE OF COMMUNITY

#### TYPEROOM TYPE OF ROOM FOR A CENTRE

Value Label

0 SINGLE ROOM

1 MULTIPLE ROOM

#### VISITS # OF VISIT/MONTH AT CENTRE

Value Label

777 NOT PROVIDED

#### WAITROOM WAITING ROOM AVAILABLE?

Value Label

0 NO

1 YES

#### RATIO1 STAFF VOLUNTEER RATIO

MOST TIME SPENT BY COORDINATOR WITH CLIENTS



